

Inpatient Experience

Snapshot report - April 2019

Consistent and Coordinated Care

There are a number of clinical guidelines, protocols and pathways at Counties Manukau Health that detail the processes and procedures needed to ensure that our patients experience seamless, coordinated care right from prior to admission through until after discharge.

Most of our patients tell us that these guidelines, protocols and pathways are working well and there are a number of patient stories in our survey data that detail what it feels like for patients when the system works the way it was designed to. There are, however, also stories from frustrated patients who tell us what it is like when these systems don't work properly. Some are left unsure about what is happening, others tell us they don't know who to listen to and many of these are left confused as to what is going on. Coordination once a patient leaves hospital is an area where many patients feel let down; one-fifth of all respondents who commented on our coordination said that follow up after discharge was poor.

Overall, we have seen a statistically significant and sustained increase in patient experience ratings over the past 24 months. Excellent and very good ratings have increased by two percentage points to 81%, whilst poor and fair ratings have decreased by the same margin, down two percentage points from 8% to 6%.

Jenny Parr
Chief Nurse and Director of Patient
and Whaanau Experience

CM Health patients tell us that they have a **good experience of consistent and coordinated care** when these things happen...



Clinical records are kept up to date, any instructions are recorded and these are passed on during a thorough handover process. Patients particularly appreciate it when they don't need to repeat themselves.



Discharge is coordinated and efficient and care is taken to ensure every patient leaves with information on what they should or should not do, who to contact if they are worried and any danger signals to watch out for.



They are informed promptly of any changes or delays in treatment, and given approximate time frames to indicate when things might happen.



Advice, information and treatment processes are consistent between staff and teams.

There were 3 different points of view when my leg plaster was coming off.



My midwife kept me in the loop, made sure I understood how to care for myself and baby while at home and reassured me that if anything was wrong to contact them.



The various tests needed for my several conditions were coordinated between the different disciplines extremely well with good results and very clear explanation of my condition.



All staff were well informed and familiar with why I was in hospital and the care I required. Despite having multiple doctors and midwives I felt they worked well as a team so that all handovers were seamless.



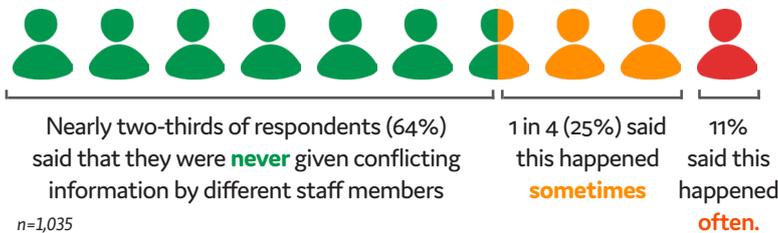
All data in this report are from the 6 month period 01.09.18 - 28.02.19. Comparison data are from 01.03.18-31.8.18. Any differences noted are statistically significant (<p.05).

COORDINATION INSIDE HOSPITAL



CONFLICTING INFORMATION

We asked our inpatients if they ever received conflicting information from staff, where one person would say something and other would tell them something completely different.



n=1,035

There has been no change on this measure when compared with the six months prior (01 March 2018 - 31 August 2018).



TEAMWORK

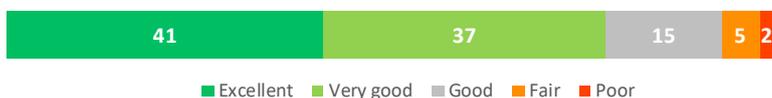
We asked our inpatients how well staff worked together.

Doctors and nurses or midwives



Just over three-quarters of respondents (77%) rated the way that doctors, nurses and midwives worked together as **excellent** or **very good**.

Other staff and healthcare team



Similarly, 78% of respondents rated the way that other staff such as physiotherapists, radiographers, occupational therapists or dietitians worked with other members of the healthcare team as **excellent** or **very good**.

There has been no change on either of these measures when compared with the six months prior (01 March 2018 - 31 August 2018).

PATIENT FEEDBACK

WHEN CARE IS CONSISTENT

Inpatients who commented positively on our consistent and coordinated care said they:

- Received quality care from compassionate, caring and respectful staff (29% of all comments).
- Witnessed good communication between staff and teams (14%).
- Were given consistent advice and information, and were kept informed as to what was happening (10%).
- Did not experience any delays in care or treatment and were attended to promptly when they needed help (8%).

SUGGESTED IMPROVEMENTS

Inpatients suggested that their experience of consistent and coordinated care could be improved by:

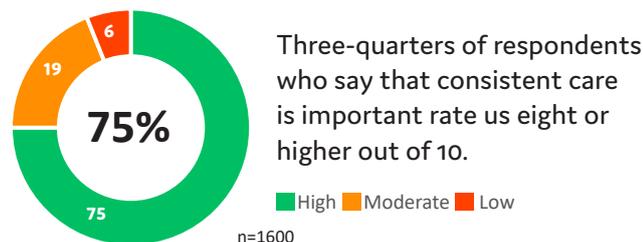
- Better communication with the patient, particularly around any delays in care or treatment or when decisions or plans are changed (18% of all comments).
- Better communication between staff and teams, taking particular care to apply consistent treatment protocols and provide consistent information and advice (13%).
- Offering consistent patient care which is grounded in compassion, caring and empathy and uses active listening and open communication (11%).

When consistent and coordinated care matters

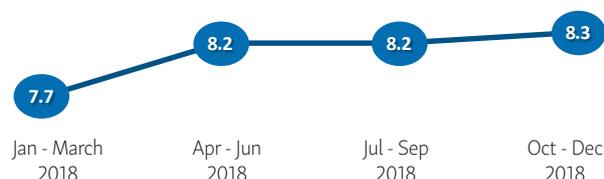


of respondents say that getting consistent and coordinated care whilst in hospital is one of the three things that matters most.

HOW DO WE RATE?



AVERAGE RATING OVER 12 MONTHS



IN DEPTH: COORDINATION INSIDE HOSPITAL

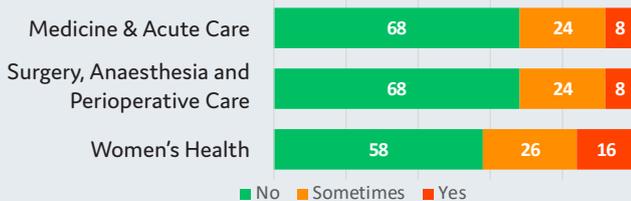


CONFLICTING INFORMATION

BY DIRECTORATE

Women's Health respondents were significantly more likely to say they **were given conflicting information** than respondents from Medical or Surgical and Ambulatory services (16% compared with 8%).

Conflicting information by directorate (%)



(Medical Services n=199; Surgical & Ambulatory n=436; Women's Health n=312)

"Every time nurses handed over to the next shift they told the next nurse exactly what had been happening and also what was to be done."

(Surgical & Ambulatory)

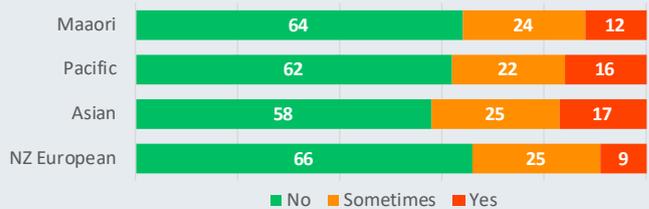
"Over one day I was given conflicting advice from the 3 different midwives on shift. This was very confusing."

(Women's Health)

BY ETHNICITY

Respondents who identify as **Pacific** or **Asian** are significantly more likely to say they **were given conflicting information** than patients of NZ European ethnicity.

Conflicting information by ethnicity (%)



(Maaori n=110; Pacific n=163; Asian n=171; NZ European n=522)

"Communication was consistent and strong so that everyone had the same understanding of the approach and what we were aiming to achieve."

(NZ European)

"Was told conflicting information by each person I saw. Each shift change the plan changed. Very confusing."

(Pacific)



TEAMWORK

BY DIRECTORATE

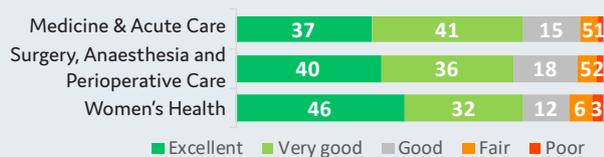
Doctors and nurses or midwives



Respondents who were cared for in **Women's Health** were significantly **more likely** to rate the teamwork of doctors with nurses and midwives as **excellent**.

(Medical Services n=202; Surgical & Ambulatory n=435; Women's Health n=317)

Other staff and healthcare team



There are no significant differences in the way respondents rate the teamwork of other staff with other members of the healthcare team.

(Medical Services n=162; Surgical & Ambulatory n=291; Women's Health n=185)

BY ETHNICITY

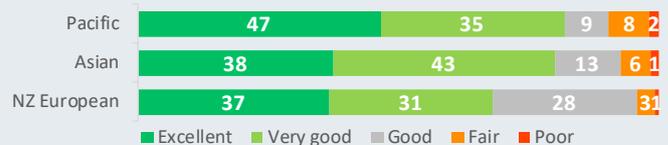
Doctors and nurses or midwives



Whilst Pacific respondents were significantly **more likely** to rate the teamwork of doctors with nurses and midwives as **excellent**, their overall very good and excellent ratings were comparable with other ethnicities.

(Maaori n=110; Pacific n=163; Asian n=176; NZ European n=520)

Other staff and healthcare team



Pacific respondents were significantly **more likely** to rate the teamwork other staff with the rest of the healthcare team as **excellent** or **very good**.

(Maaori (suppressed as <50 responses); Pacific n=116; Asian n=136; NZ European n=386)

COORDINATION OUTSIDE HOSPITAL



SERVICE COORDINATION

We asked our inpatients to rate the coordination of care between the hospital, home and other health services prior to admission and after discharge.

Admission to hospital



Two-thirds of respondents (68%) rated the coordination of their care prior to hospital as **excellent** or **very good**.

After discharge



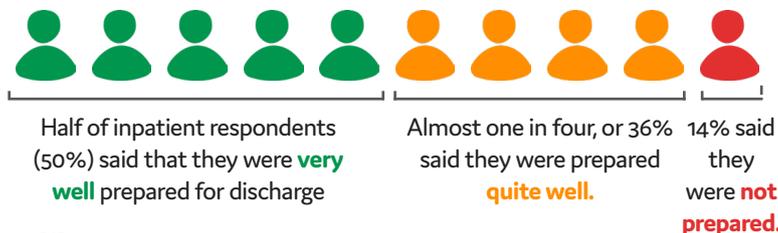
Almost one-quarter of respondents (23%) rated the coordination of their care after leaving hospital as **fair** or **poor**.

There has been no change on either of these measures when compared with the six months prior (01 March 2018 - 31 August 2018).



DISCHARGE PREPARATION

We asked our inpatients how well we prepared them for leaving hospital.



n=545

There has been no change on this measure when compared with the six months prior (01 March 2018 - 31 August 2018).

PATIENT FEEDBACK

WHEN COORDINATION WORKS WELL

Inpatients who commented positively on the coordination between hospital home and other services said:

- Follow-up after discharge, from either the hospital or community-based services was prompt and well planned (23% of all comments).
- They had a good discharge experience, where they were able to discuss the ongoing management of their health and were given information about medications, what to do and who to contact (12%)

SUGGESTED IMPROVEMENTS

Inpatients suggested that their experience of service coordination could be improved by:

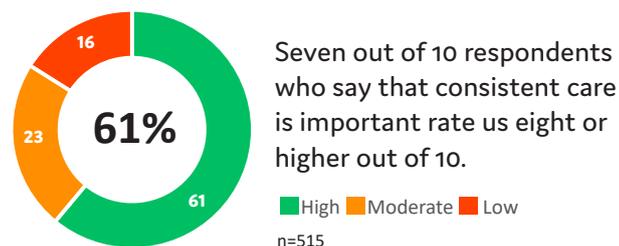
- A discharge process that is reassuring, patient-centred, well organised and well coordinated. This includes checking that patients have all the information they need to manage their health and care at home, that they are clear about their medication, and they know what to expect and who to contact if they have any questions or issues (32% of all comments)
- Better follow up after discharge, including checking (where applicable) that equipment has arrived and community-based services have been in contact (and details of who to contact to follow these up) (20%).

When coordination between hospital, home and other services matters

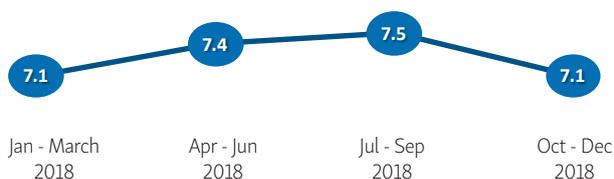


of respondents say that coordination between hospital, home and other services is one of the three things that matters most.

HOW DO WE RATE?



AVERAGE RATING OVER 12 MONTHS



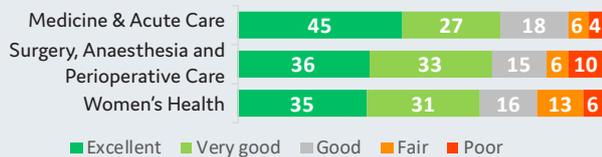
IN DEPTH: COORDINATION OUTSIDE HOSPITAL



SERVICE COORDINATION

BY DIRECTORATE

Admission to hospital



Whilst there is some variation in coordination ratings (prior to admission) between directorates, none of these are statistically significant.

(Medical Services n=71; Surgical & Ambulatory n=225; Women's Health n=127)

After discharge

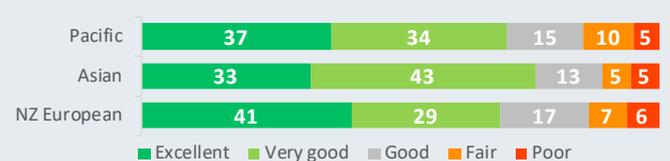


Three out of 10 **Women's Health** respondents rate the coordination of their care after discharge as **fair** or **poor**.

(Medical Services n=77 Surgical & Ambulatory n=239; Women's Health n=109)

BY ETHNICITY

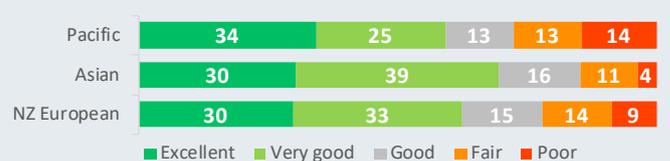
Admission to hospital



There are no significant difference between ethnic groups on ratings of coordination prior to discharge.

(Maaori (suppressed); Pacific n=82; Asian n=92; NZ European n=222)

After discharge



Pacific respondents were significantly more likely to rate the coordination of their care after discharge from hospital as **fair** or **poor**.

(Maaori (suppressed); Pacific n=76; Asian n=82; NZ European n=235)

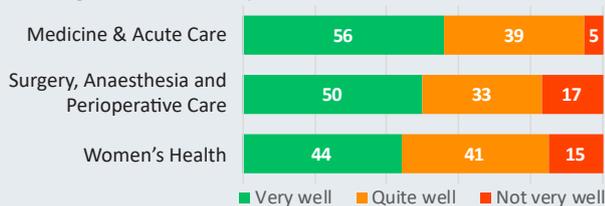


DISCHARGE PREPARATION

BY DIRECTORATE

Medical services respondents were significantly less likely to say they **were not very well prepared for discharge** (5%) than respondents from Women's Health (15%) or Surgical and Ambulatory services (17%).

Conflicting information by directorate (%)



(Medical Services n=105; Surgical & Ambulatory n=290; Women's Health n=114)

"All resources for aftercare were delivered prior to me being discharged."

(Women's Health)

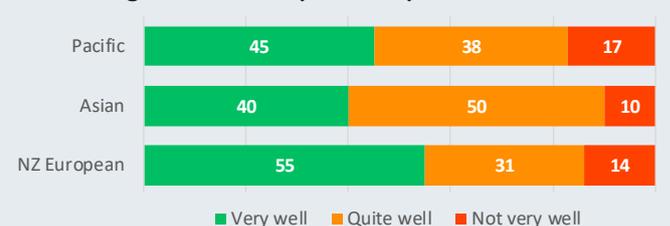
"The discharge information was not complete and confusing around medication and relevant support information ... which then meant I ended up back in hospital."

(Surgical & Ambulatory)

BY ETHNICITY

NZ European respondents are significantly more likely to say they **were very well prepared for discharge** than patients of other ethnicities.

Conflicting information by ethnicity (%)



(Maaori (suppressed); Pacific n=81; Asian n=91; NZ European n=295)

"I was going [overseas]. My Doctor arranged to have an early clinic in Auckland and provided a contact [overseas] for me to make an appointment when I arrived."

(NZ European)

"I was discharged but [didn't get] my antibiotic tablets until almost 48hrs later as the prescription was not sent to the pharmacy"

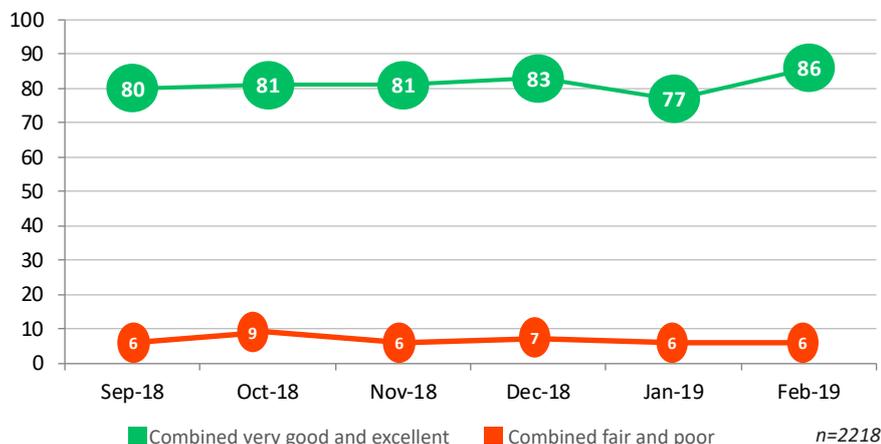
(Pacific)

OVERALL CARE AND TREATMENT

OVERALL EXPERIENCE RATINGS

Our very good and excellent ratings have averaged 81 percent over the past twelve months, whilst our poor and fair ratings have averaged six percent.

Combined very good/excellent and poor/fair ratings September 2018 to February 2019 (all respondents, %)



Overall care and treatment ratings by division September 2018 to February 2019 (all respondents, %)

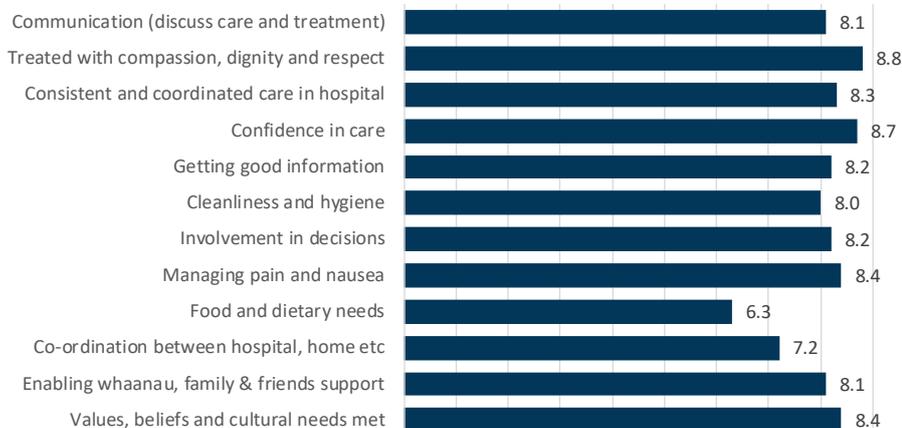
The differences between divisions are statistically significant ($p < .05$)



Overall n= 2218; Medicine & Acute Care n=355; Surgery, Anaesthesia and Perioperative Care n=767; Women's Health n=850; ARHOP (Rehabilitation) n=187. Note that the data from some divisions are too small to be included here (<100).

WHAT MATTERS TO PATIENTS?

Our patients are asked to nominate the three dimensions of care that are important to them, and then to rate us on these (out of 10). The dimensions below are presented in order of what matters most to patients.



Communication n=1,284; Dignity and respect n=1,097; Consistent care n=1,600; Confidence n=729; Information n=709; Pain and nausea n=438; Cleanliness n=472; Decisions n=403; Coordination n=258; Food n=276; Whānau support n=230; Cultural needs n=326.

Respondents who rated their care as **EXCELLENT** told us...

"The doctors explained my situation perfectly and what tests and or x-rays would have to take place before a plan for my treatment could be actioned... shout-out to the nursing and cleaning staff, thanks to all of you who make a difference every day in the lives of perfect strangers that come through your doors."

"All the staff members in my ward were polite, efficient and kind. Always felt acknowledged and updated about everything. Everyone had smiling faces and a offered a helping hand when needed. The rooms were also very hygienic and clean which was really nice."

"The amount of care and respect I got from medical staff was excellent especially since we had several concerns and were anxious. Staff were empathetic and positive easing our fears and worries with their pleasant manner and attentive care."

VERY GOOD

"The nurses in [my] ward were excellent. I also thought that the lady who came to clean the rooms and refresh the hand towels etc in the morning was a real breath of fresh air, each morning she would appear with a great big smile on her face and a cheery good morning. People like her are probably not recognised enough but make a real difference to someone stuck in hospital."

"I was admitted with several problems and I found the coordination of the various disciplines was excellent and the administration and explanation of procedures and results by [the doctor] were both caring and compassionate, especially during the family meeting."

GOOD

"Staff wanted to help but were frequently overworked, stretched and so didn't follow up on tasks."

FAIR

"Some of the doctors was great while others just made me feel they had 2 seconds to spare and rushed through everything and sent me home so I could come back in four days time."

