



SA Health

MEASURING CONSUMER EXPERIENCE 2023



Government
of South Australia

SA Health

MEASURING CONSUMER EXPERIENCE REPORT 2023

SA Health wants every patient to have the best possible hospital experience.

Listening to our patients improves our health care services.

Each year we ask South Australians about their experiences of their overnight stay in a public metropolitan or country hospital. We ask about their views and concerns, involvement in decision making, being kept informed, being heard, treatment and care, clinical knowledge and skills, pain relief and overall care.

SA Health has adopted the Australian Hospital Patient Experience Question Set (AHPEQS), which was developed by the Australian Commission on Safety and Quality in Health Care (ACSQHC). This survey is used by hospitals and healthcare services to ask patients who have recently been discharged about their experiences of treatment and care.

The answers to the questions help hospitals and healthcare services to deliver the level of care that patients need and want.

The survey feedback shows us what we're doing well and where we need to improve. It is also a great way for us to compare our care with other hospitals around Australia and the world. The answers provided feed into processes to improve hospital and healthcare services.

SA Health uses an independent body to conduct the survey, known as the SA Consumer Experience Surveillance System (SACESS).

Surveys were undertaken between January to December 2022, and over **4,451** South Australians were interviewed.

Your experience matters, it drives change and improves our health care services.

METRO
HOSPITALS

7

COUNTRY
HOSPITALS

10

4,451

South Australians interviewed in 2022

86.0% response rate

18.6%
16-34 YEARS

19.7%
35-54 YEARS

826

32.2%
55-74 YEARS

877

29.6%
75 AND OVER

1,431

1,316

55% FEMALE
2,441

45% MALE
2,009

Main language spoken
at home:

ENGLISH

4,009

OTHER

443

37 surveys were completed
with language support for:

Languages include:

- Arabic
- Cantonese
- Dari
- Greek
- Italian
- Khmer
- Mandarin
- Spanish
- Urdu
- Vietnamese

IMPROVING CONSUMER EXPERIENCE



Views and concerns listened to

82%

of patients felt their **views and concerns were listened to always or mostly.**

compared to 2021
83.3%



Individual needs met

ALMOST 85%

of patients felt their **individual needs were met almost or most of the time.**

compared to 2021
85.4%



Felt cared for by staff

OVER 87%

of patients **felt mostly or always cared for.**

compared to 2021
88.7%



Involved in making decisions

OVER 83%

of patients **felt they were involved in decision making.**

compared to 2021
83.5%



Being kept informed

OVER 82%

felt they were **kept informed as much as they wanted** about their care and treatment.

compared to 2021
82.6%



Staff communicated with each other

ALMOST **84%**

could tell **staff involved in their care communicated with each other.**

compared to 2021 **85.6%**



Pain relief met needs

OVER **89%**

of patients **received pain relief that met their needs.**

compared to 2021 **89.7%**



Felt confident in safety

OVER **89%**

felt **confident in the safety of their treatment.**

compared to 2021 **89.8%**



Overall quality

OVER **86%**

felt the overall **quality of care received was good or very good.**

compared to 2021 **88.2%**



Recommend hospital

ALMOST **91%**

of patients would **recommend their hospital** to a relative or friend.

compared to 2021 **92.7%**

*AHPEQS – Australian Hospital Patient Experience Question Set
The SA Health benchmark of 85% was met in five out of ten categories, the remaining five were within 3% of the benchmark.



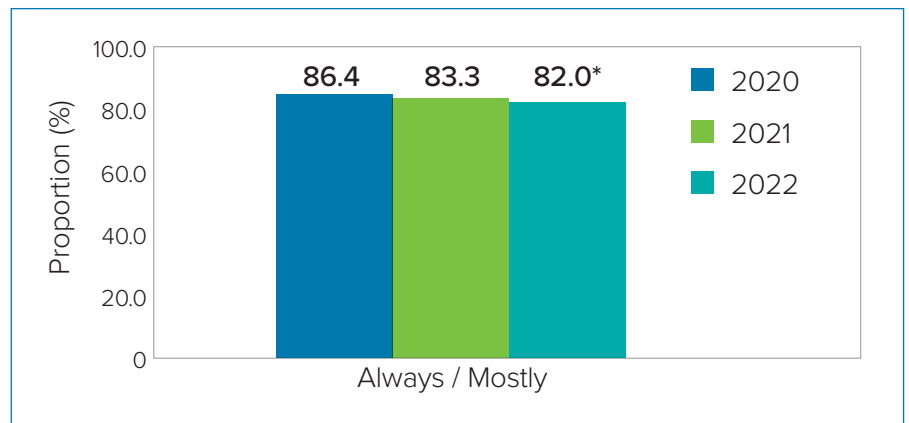
VIEWS AND CONCERNS LISTENED TO

82%

of patients felt their **views and concerns** were listened to 'Always' or 'Mostly'.

My views and concerns were listened to

The majority of respondents felt that their views and concerns were listened to always (52.6%) or mostly (29.5%), while only very few thought that that happened rarely (4.0%) or never (2.5%).



What does this mean for the consumer?

FACTOR	DEFINITION
Distress acknowledgment	Having any distress or discomfort acknowledged by staff
Emotional support	Receiving emotional support from staff when needed
Patient knowledge	Patient's knowledge of their body and condition taken seriously by staff
Invited to be involved in decisions about care and treatment	Patient being invited to contribute their knowledge, needs, preferences and views to care and treatment decisions.
Carer's knowledge	Carer's knowledge and input being valued by staff
Being listened to	Being listened to
Having enough time	Having enough time to talk to staff

We are listening to our consumers

"I have a number of health issues and take various medications for them including pain relief. When I was in the hospital, they ignored what I explained to them about my health issues and the medications I needed. They just gave me Panadol which was not effective in relieving the pain. It was frustrating that they didn't listen or respect my opinions particularly when I have been dealing with them for many years."

"I really felt listened to, that they realised that I knew what I was talking about and they respected me. They acted quickly which was very impressive. Also, the fact that they decided to have me treated at home via My Hospital at Home service instead of spending a week in hospital, which was brilliant because I didn't need to take up a bed that someone else would need."



INDIVIDUAL NEEDS MET

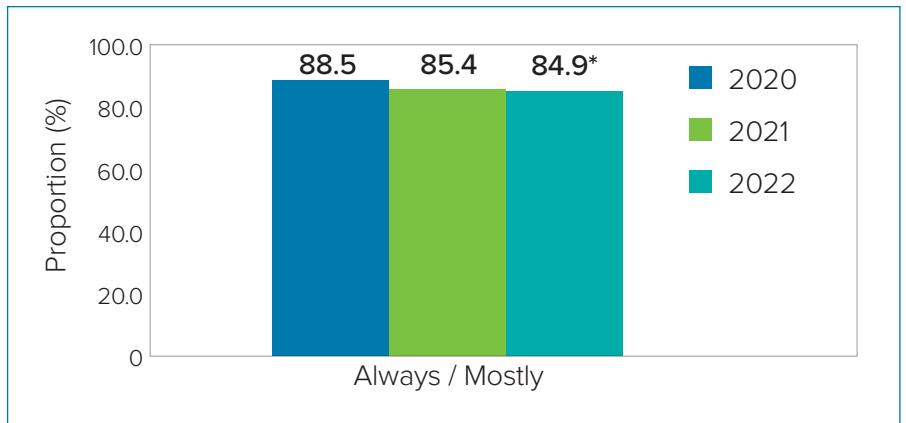
ALMOST

85%

of patients felt their **individual needs** were met 'Always' or 'Mostly'.

My individual needs were met

The majority of respondents felt that their needs were met always (54.3%) or mostly (30.5%), while only a few thought that it happened rarely (3.4%) or never (1.9%).



What does this mean for the consumer?

FACTOR	DEFINITION
Responsiveness and flexibility	Staff being flexible in their approach in response to a patient’s needs and preferences
Whole person approach	Staff take ‘whole of life’ needs into account (e.g. social, psychological, work and quality of life needs)
Comorbidities	Staff taking other health conditions or illnesses into account (other than the reason for admission)

We are listening to our consumers

“I went in as a private patient but I wasn’t able to have my own room so I was put in a room with four people. It was very noisy and busy so it was hard to get proper rest.”

“It was the first time I’ve had surgery. The amount of information I was given by the surgeon was very good. They were very good at answering my concerns and made me feel confident.”

INDIVIDUAL NEEDS WERE NOT MET

“My individual needs were met” was asked and answered negatively.

WHEN INDIVIDUAL NEEDS WERE NOT MET

645

patients who reported that their individual needs were not met:

12.2%

responded that staff always explained why this was the case

23.7%

said that this happened mostly

while around one third (**29.3%**) responded that staff never explained why their needs could not be met.





FELT CARED FOR BY STAFF

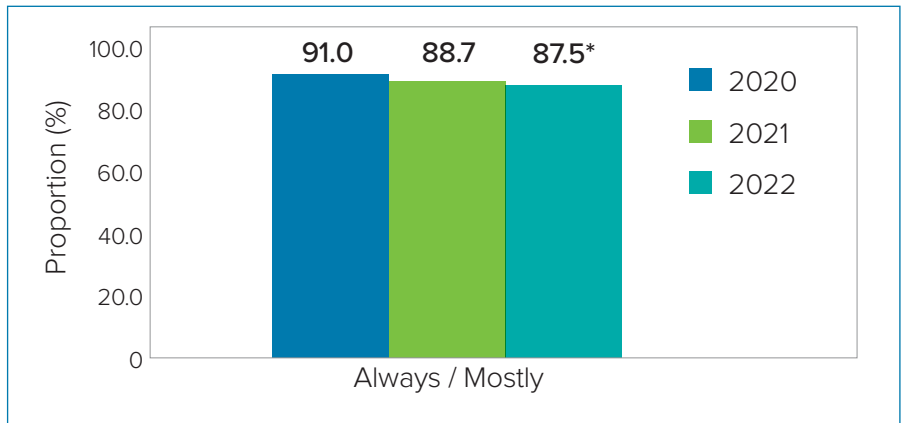
OVER

87%

of patients felt **cared for by staff** was 'Always' or 'Mostly'.

I felt cared for

The majority of respondents felt that they were cared for always (64.2%) or mostly (23.3%), while only very few thought that it happened rarely (2.7%) or never (1.5%).



What does this mean for the consumer?

FACTOR	DEFINITION
Staff availability	Feeling that staff are available if you need them
Staff responsiveness	Feeling that staff will respond to any concerns or questions
Left to cope alone	Not being left to manage alone when you need support or help
Genuine caring, attempt to understand, empathy	Feeling that staff genuinely care about you
Thoughtfulness and personal touch	Being treated in a kind and thoughtful way
Staff positivity, reassurance	Staff having a positive and reassuring manner

We are listening to our consumers

“My father is 91 and has had a stroke and is also hard of hearing and I thought they didn’t take enough time and care to explain things to him. I understand they were very busy and under-staffed but he had to wait a long time get help when he needed it.”

“The nurses were excellent as I could see how busy and stressed they were but they were still able to provide a high level of patient care which I really appreciated.”



INVOLVED IN MAKING DECISIONS

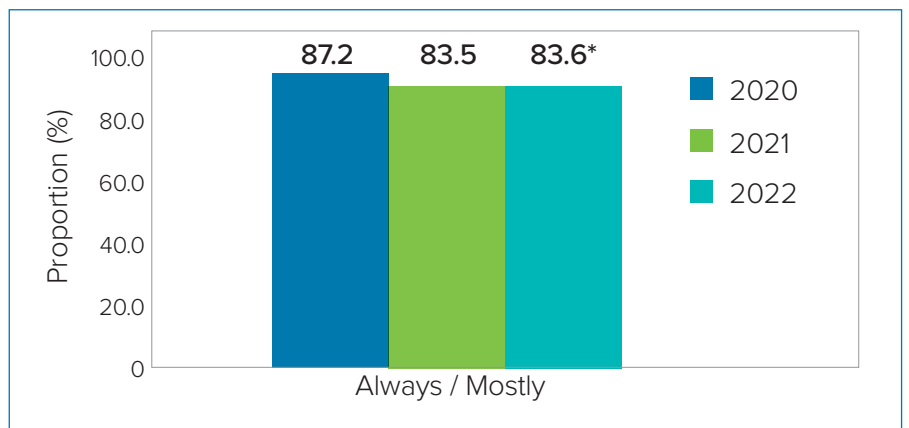
OVER

83%

patients felt that they were being **involved in making decisions** about their treatment and care were met 'Always' or 'Mostly'.

I was involved as much as I wanted in making decisions about my treatment and care

The majority of respondents were involved in making decisions about their treatment and care always (60.7%) or mostly (22.8%), while very few felt like that happened rarely (3.9%) or never (4.2%).



What does this mean for the consumer?

FACTOR	DEFINITION
Distress acknowledgment	Having any distress or discomfort acknowledged by staff
Emotional support	Receiving emotional support from staff when needed
Patient knowledge	Patient's knowledge of their body and condition taken seriously by staff
Invited to be involved in decisions about care and treatment	Patient being invited to contribute their knowledge, needs, preferences and views to care and treatment decisions
Being listened to	Being listened to
Having enough time	Having enough time to talk to staff

We are listening to our consumers

“Main thing is the doctors; they don’t really want to listen to you, they have their minds made up already, they don’t understand the level of pain involved.”

“I was very pleased with all of the treatment and care from all of the staff. I was in having a knee replacement and the surgeon was excellent. They were very open and listened to my opinions about when I should start getting up and walking as it took a while for the anaesthetic to wear off. I do have an issue with some pain relief but they were able to find something that didn’t cause any reaction. I couldn’t of asked for better care.”



BEING KEPT INFORMED

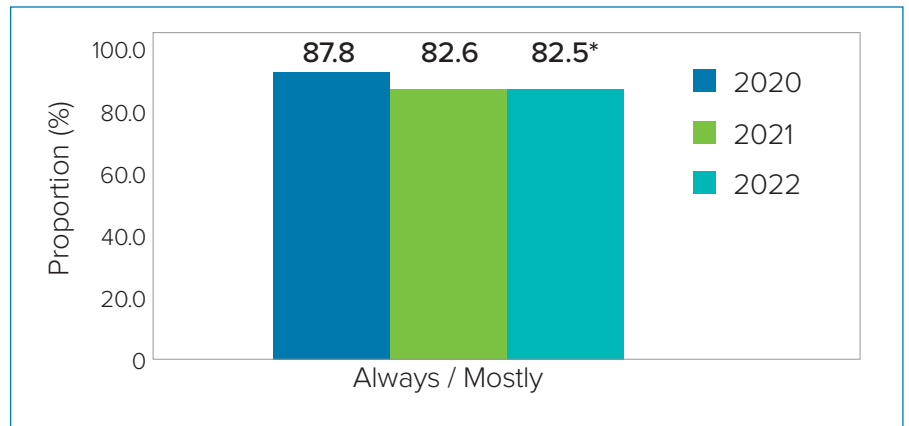
OVER

82%

of patients they were **kept informed** as much as they wanted about their treatment and care were met 'Always' or 'Mostly'.

I was kept informed as much as I wanted about my treatment and care

The majority of respondents felt that they were kept informed as much as they wanted about their treatment and care always (61.2%) or mostly (21.3%), while very few thought that it happened rarely (4.7%) or never (3.3%).



What does this mean for the consumer?

FACTOR	DEFINITION
Knowing what's going on	Knowing what is happening with treatment and care
Knowing what to expect	Knowing what to expect with treatment and care
Knowing reason	Knowing why things are being done
Knowing how it went	Knowing how treatments or procedures have gone
Knowing who staff are and why they're involved	Knowing the roles of staff and why they are involved in care

We are listening to our consumers

"I was given very little information about what my issue was when I was in the hospital. They did send a letter to me after I had returned home but the terms were very hard to understand what they meant so it would be helpful if they can make it easier for people to understand the issues and put it in plain English."

"I really appreciated how quickly, comprehensively and efficiently I was assessed, listened to, and given results for all the tests done. I was also impressed with the written report I was given on leaving. The staff were all really friendly and professional at all times. They were also very aware that my husband was in the car accident too and kept us both informed about each other which was very comforting and reassuring."



STAFF COMMUNICATED WITH EACH OTHER

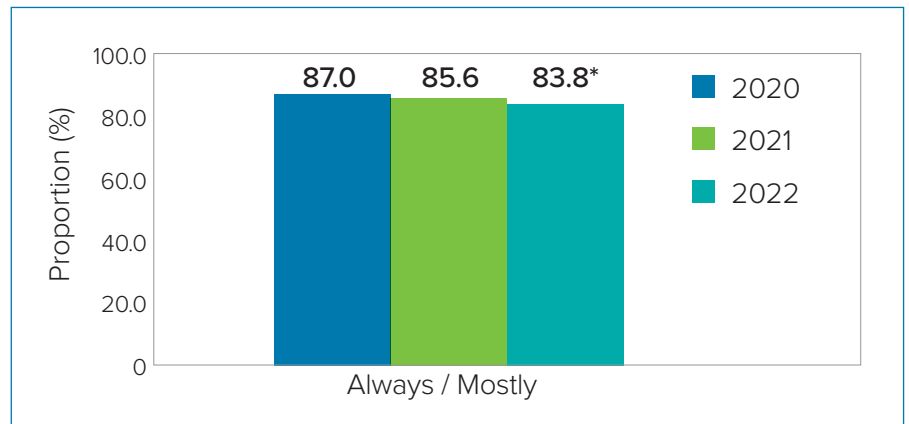
ALMOST

84%

of patients felt that **staff involved in their care** communicated with each other 'Always' or 'Mostly'.

As far as I could tell, the staff involved in my care communicated with each other about my treatment

The majority of respondents felt that staff involved in their care communicated with each other always (59.0%) or mostly (24.9%), while only a few thought that it happened rarely (3.9%) or never (2.2%).



What does this mean for the consumer?

FACTOR	DEFINITION
Written overall plan	Having a written plan showing the steps involved in care and treatment
Staff share information	Different staff or services involved in a patient's care and communicating with one another about this care
Care co-ordination	Having one person or team co-ordinating all the different parts of a patient's care
Continuity of relationship	Being able to see the same staff for treatment and care over time

We are listening to our consumers

“Communication among the hospital system was poor; we didn’t get told what was happening and what to expect.”

“The coordination between staff was very good and this definitely helped with the care provided to me.”



PAIN RELIEF MET NEEDS

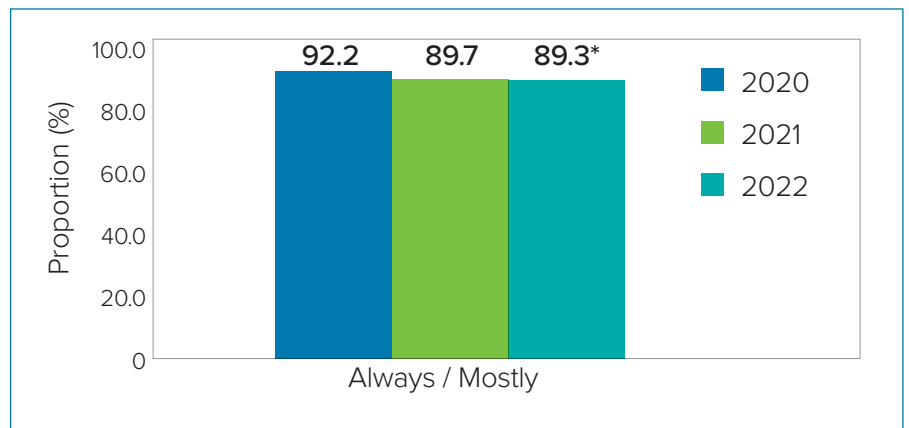
OVER

89%

of patients felt that the **pain relief** they received met their needs 'Always' or 'Mostly'.

I received pain relief that met my needs

The majority of respondents felt that the pain relief they received met their needs always (72.8%) or mostly (16.5%), while very few thought that it happened rarely (2.5%) or never (2.0%).



What does this mean for the consumer?

FACTOR	DEFINITION
Waiting in pain	Not waiting unnecessarily long for pain relief
Appropriateness of pain relief	Receiving appropriate pain relief
Medication management	Medicines being managed safely

We are listening to our consumers

“I have a number of health issues and take various medications for them including pain relief. When I was in hospital, they ignored what I explained to them about my health issues and the medications I needed. They just gave me Panadol which was not effective in relieving the pain.”

“They were all very kind and genuine. They were happy to help me and very good with my pain relief. I’m very grateful.”



FELT CONFIDENT IN SAFETY

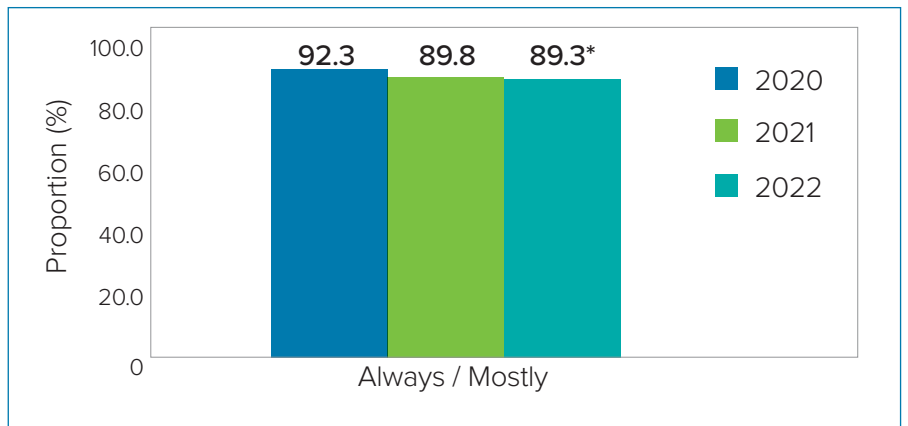
OVER

89%

of patients felt confident in the safety of their treatment and care 'Always' or 'Mostly'.

When I was in hospital, I felt confident in the safety of my treatment

The majority of respondents felt confident in the safety of their treatment and care always (71.7%) or mostly (17.5%), while only a few thought that it happened rarely (2.4%) or never (2.0%).



What does this mean for the consumer?

FACTOR	DEFINITION
Staff clinical knowledge	Patient feeling that staff have good knowledge of illness/condition
Staff clinical skills	Patient finding that staff have good clinical skills (e.g. surgery, needle insertion)
Trust in professionals	Patient having confidence in the abilities of the professionals involved in their care and treatment

We are listening to our consumers

“There was no thorough investigation about my medical background and no one told me what was happening or which medication I should take after leaving the hospital.”

“Effort that they went to, to work out, to decide what was wrong with me. Plenty of tests, interviews with physicians, one in the middle of the night, but that’s ok. The professionalism was high. And certainly trustworthy.”

HARM OR DISTRESS DISCUSSED WITH STAFF

82.7%

of patients **did not** experience harm or/and distress as a result of their treatment and care.

OF THE

17.3%

that did experience harm or/and distress:

2.0%

had experienced physical harm

10.9%

experienced emotional distress

4.5%

experienced both

OF THE

755

respondents who reported that they had experienced harm or distress:

49.4%

said that this was discussed with them

50.6%

said that their harm or distress was not discussed with them

***Applies when question relating harm or distress were answered in the affirmative.**



OVERALL QUALITY

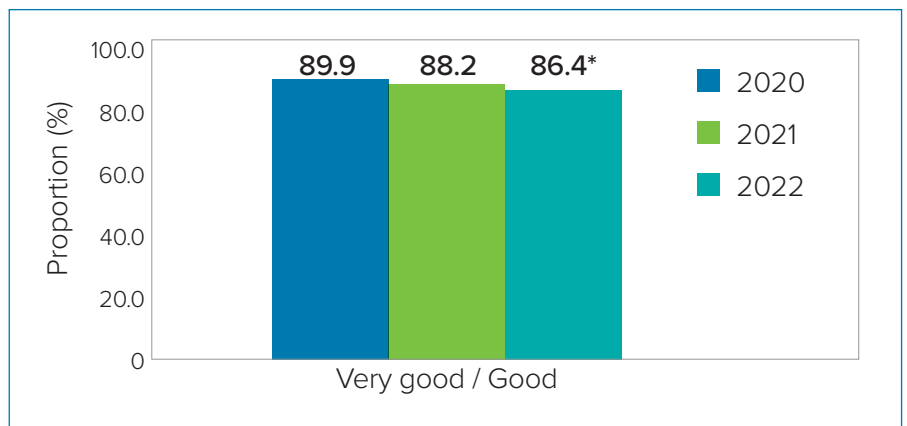
OVER

86%

of patients **felt confident** in the safety of their treatment and care ‘Very good’ or ‘Good’.

Overall, the quality of the treatment and care I received was very good or good

The majority of respondents felt that the overall quality of their care was very good (61.2%) or good (25.2%) while only a minority thought that it was poor (2.8%) or very poor (2.0%).



What does this mean for the consumer?

FACTOR	DEFINITION
Overall organisation	Feeling that the health service is well organised overall in relation to treatment and care

We are listening to our consumers

“The overall experience was terrible. I hate needles and I had about 5 people try to take my blood and they couldn’t. It made me feel so sick.”

“The overall care provided by the majority of the midwives was exceptional. I was vocal about my expectations of care and was able to communicate my needs and expectations clearly, with this considered, in my personal experience, overall it was a first class experience and the midwifery team is an exceptional example of professionalism and human care.”



PATIENT RIGHTS AND ENGAGEMENT

A set of five questions around patient rights and engagement include:

1 Did anyone ask whether you had any cultural or religious beliefs that might affect the way you were treated in hospital?

○ **70.9%** were **not asked** asked if they had any **cultural or religious beliefs** that might affect the way they were treated in the hospital.

○ Less a quarter (**22.6%**) were asked after admission.

○ **6.5%** were asked at pre admission.

2 If you needed one, did you have access to an interpreter?

○ Of the **525** respondents who required an interpreter, **56.9%** of patients were **provided an interpreter**.

3 Was your right to have an opinion respected?

○ **86.0%** of patients felt that their **right to an opinion was always respected**.

4 Were you provided information on your rights as a patient?

○ **63.8%** were **given enough information** about their rights as a patient.

5 Did staff explain your rights as a patient to you?

○ **52.8%** reported that their **rights were explained** to them.



RECOMMEND HOSPITAL

Key concerns raised by our consumers include:

1,964

dissatisfied comments were received





PATIENT-CENTRED CARE PRINCIPLES

A person centred approach places people at the heart of health and social services, including care, support, and enablement. It is an approach where patients are recognised as individuals, encouraged to play an active role in their care, and where their needs and preferences are understood and respected. Individual patient comments have been coded into each of the patient centred care principles, additional areas and other categories. The principles have been sourced from the Picker Institute Principles of Patient Centred Care website at: <http://pickerinstitute.org/about/picker-principles>

Fast access to reliable healthcare advice

(previously access to care)

Satisfied comments regarding quick appointment speeds and accessibility of the emergency department in this principle. Dissatisfied comments regarding long waiting time to be seen in the Emergency Department and for admission (hospital bed availability), for appointments and elective surgery, and inadequate signage, were included in this principle.

Effective treatment delivered by trusted professionals

(previously coordination and integration of care)

Satisfied comments regarding their treatment being very good, and that they felt looked after, treated well or cared for, were included under this principle. Dissatisfied comments regarding delays in being seen by medical and nursing staff while on the ward, lack of competency and clinical management (wound dressings, drips, etc.), misdiagnosis or lack of concern/treatment with presenting or secondary conditions and medication issues, were included under this principle.

Continuity of care and smooth transition

(previously transition and continuity)

There were two positive comments regarding transition and continuity, both pertaining to the speed and service when being discharged. Dissatisfied comments regarding being discharged too early, or without sufficient information or arrangements regarding care at home, delays with providing medications or paperwork, and lack of follow-up regarding care/treatment, were included in this principle.

Involvement and support for family and carers

(previously involvement of family and friends)

There were no satisfied comments regarding the involvement of family and friends. Dissatisfied comments regarding family and friends not being involved, informed or included in decision making, were included in this principle.

Clear information, communication and support for self-care

(previously information, communication and education)

Satisfied comments regarding doctors and nurses providing information,

answering questions and explaining things, were included in this principle. Dissatisfied comments regarding lack of information from doctors, lack of information from staff regarding their care or treatment for patients and/or their families, and language/cultural barriers between patients and staff, were included under this principle.

Involvement in decisions and respect for preferences

(previously respect for patients' values, preferences and expressed needs)

Satisfied comments regarding staff being friendly, kind and respectful were included under this principle. Dissatisfied comments regarding staff not attending to requests from the patient, being rude or disrespectful and not listening to information being provided by the patient regarding their care, were included under this principle.

Empathy support, empathy and respect (previously emotional support and alleviation of fear and anxiety)

Satisfied comments regarding being comforted and cared for, were included in this principle. Dissatisfied comments regarding feeling upset, worried, isolated, anxious about needles or in general, and feeling unsafe, were included in this principle.

Attention to physical and environmental needs (previously physical comfort)

Satisfied comments regarding the cleanliness of the hospital and the comfort provided were included in this principle. Dissatisfied comments regarding noise at night; lack of attention/care by nursing staff; having to share a ward or bathroom with members of the opposite sex/lack of privacy; lack of pain relief; lack of cleanliness/hygiene, being moved around the hospital and equipment in need of repair, were included in this principle.

Additional areas include:

Food

Satisfied comments regarding the good quality of the food were included in this area. Dissatisfied comments regarding the lack of or wrong choice, taste (bland, unappetising), presentation (cardboard/plastic boxes and utensils), size (too large), not being offered food (including special dietary needs), were included in this area.

Emergency Department

Satisfied comments regarding the good level of care and staff in the emergency department were included in this area. Dissatisfied comments regarding the long waiting times to be seen, lack of pain relief and staff being disrespectful were included in this area.

Doctors and nurses

Satisfied comments regarding the quality of care provided by medical and nursing staff were included in this area. Dissatisfied comments regarding medical and nursing staff being abrupt/disrespectful, uncaring, not providing assistance or being incompetent with administering procedures, were included in this area.

Consumer feedback

There were no satisfied comments regarding this area and a single dissatisfied comment regarding reluctance or lack of follow up by staff regarding concerns were included in this area.

Other

Satisfied comments regarding overall satisfaction with the hospital and also with staff, were included in this area. Dissatisfied comments regarding (in order) staff shortages, maintenance, general issues with staff, hospital closure (for the Repatriation General Hospital), lost property, and financial issues, were included in this area.

For more information

Safety and Quality

SA Health

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sahealth.sa.gov.au/myexperience

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