



SA Health

# MEASURING CONSUMER EXPERIENCE 2021



Government  
of South Australia

SA Health

[sahealth.sa.gov.au](http://sahealth.sa.gov.au)

# MEASURING CONSUMER EXPERIENCE REPORT 2021

SA Health wants every single 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 health care services to ask recent patients about their experiences of treatment and care.

The answers to the questions help hospitals and health care services to deliver the sort 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 health care services.

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

Surveys were undertaken between January to December 2020, and over **4,000** South Australians were interviewed.

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

# 4,003

South Australians interviewed in 2020

METRO  
HOSPITALS

# 7

COUNTRY  
HOSPITALS

# 7

20.5%  
16-34 YEARS

20.5%  
35-54 YEARS

# 821

# 819

32.4%  
55-74 YEARS

26.6%  
75 AND OVER

# 1,297

# 1,066

55% FEMALE  
**2,215**

45% MALE  
**1,788**

Main language spoken  
at home:

ENGLISH

# 3,590

OTHER

# 413

40 surveys were completed with language support for Arabic, Chinese, Greek, Italian, Mandarin, Spanish and Vietnamese consumers.

Languages include:

- Arabic
- Chinese/Mandarin/
- Cantonese
- Croatian
- Filipino
- Greek
- Hindi
- Italian
- Nepali
- Persian
- Punjabi
- Serbian
- Spanish
- Vietnamese

PERFORMANCE  
BENCHMARKS  
WERE MET IN

# 10/10

CATEGORIES

# IMPROVING CONSUMER EXPERIENCE



Views and concerns listened to

ALMOST  
**87%**

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

compared to 2019  
**87.0%**



Individual needs met

ALMOST  
**89%**

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

compared to 2019  
**89.5%**



Felt cared for by staff

**91%**

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

compared to 2019  
**90.4%**



Involved in making decisions

OVER  
**87%**

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

compared to 2019  
**85.6%**



Being kept informed

ALMOST  
**88%**

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

compared to 2019  
**84.8%**



Staff communicated with each other

**87%**

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

compared to 2019 **85.6%**



Pain relief met needs

**OVER 92%**

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

compared to 2019 **91.9%**



Felt confident in safety

**OVER 92%**

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

compared to 2019 **91.2%**



Overall quality

**ALMOST 90%**

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

compared to 2019 **89.9%**



Recommend hospital

**OVER 94%**

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

compared to 2019 **94.2%**

\*AHPEQS – Australian Hospital Patient Experience Question Set  
SA Health benchmark is 85%



# VIEWS AND CONCERNS LISTENED TO

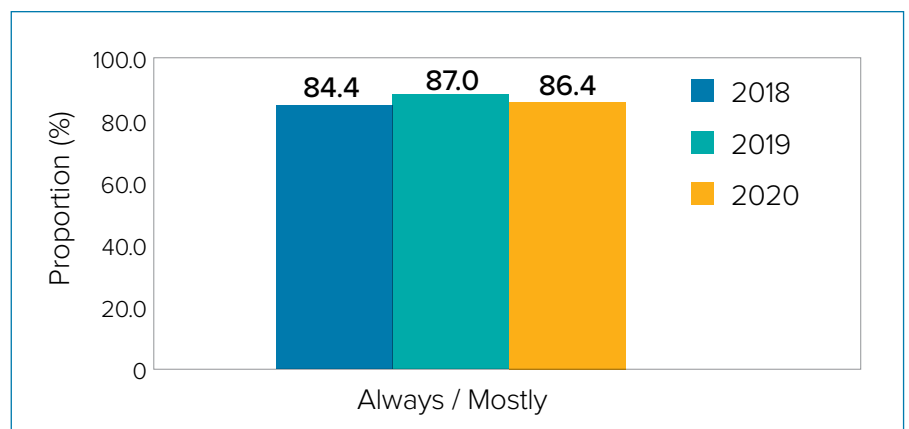
ALMOST

# 87%

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 (60.3%) or mostly (26.1%), while only a few thought that it happened rarely (2.4%) or never (1.3%).



What does this mean for the consumer?

FACTOR	DEFINITION (What does this mean)
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 think they went out of their way to make sure that I am comfortable. They looked after me very well and listened to my concerns."

"I had to go in for surgery and they told me to come at 6.45am in the morning but then I had to wait till 2pm before they did the operation. I don't know why I had to come in so early and was a little distressed having to wait so long."



# INDIVIDUAL NEEDS MET

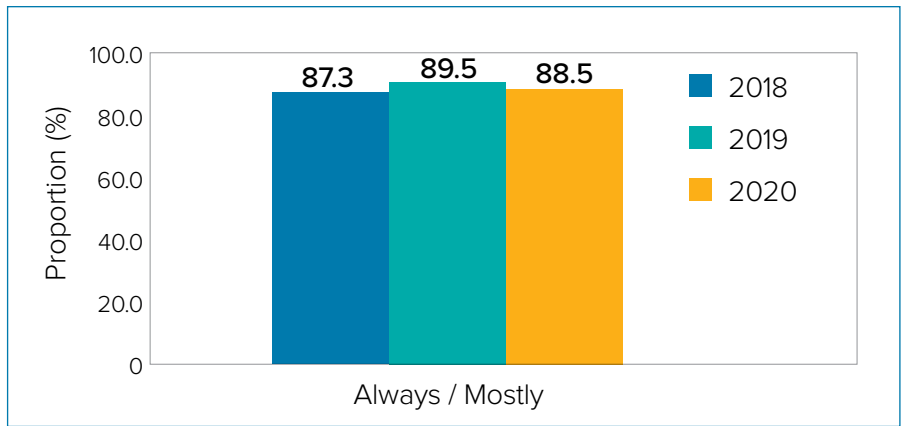
ALMOST

**89%**

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 (61.9%) or mostly (26.6%), while only a few thought that it happened rarely (1.9%) or never (0.7%).



What does this mean for the consumer?

FACTOR	DEFINITION (What does this mean)
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 found that the staff were flexible to my personal needs. I cannot fault anyone of them.”

“They concentrated on the main matter but didn’t treat me holistically. They dismissed some more minor issues I had, like the side-effects from the strong pain killers I was taking, but I was too ill to bother them about them. It caused my longer term recovery. That was the only negative about my treatment.”

# INDIVIDUAL NEEDS WERE NOT MET

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

WHEN INDIVIDUAL NEEDS WERE NOT MET

# 458

patients who reported that their individual needs were not met:

## 10.0%

responded that staff always explained why this was the case

## 15.9%

said that this happened mostly

while around one third (**33.0%**) responded that staff never explained why their needs could not be met.





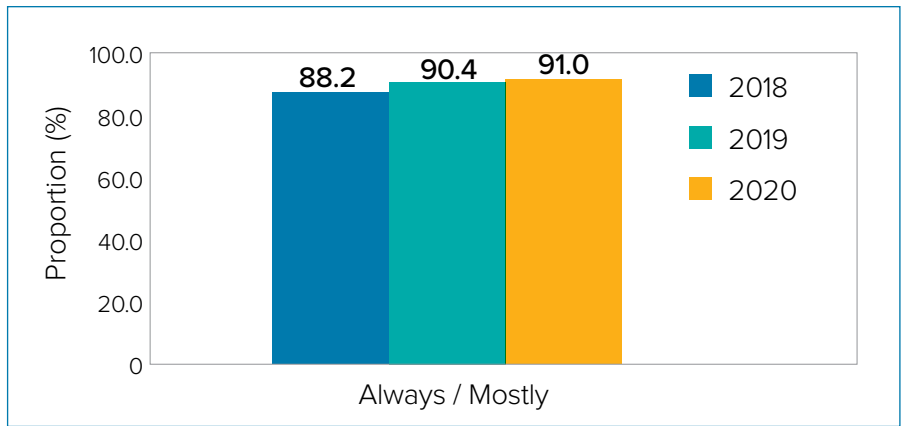
# FELT CARED FOR BY STAFF

# 91%

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 (69.8%) or mostly (21.2%), while only a few thought that it happened rarely (1.6%) or never (0.9%).



What does this mean for the consumer?

FACTOR	DEFINITION (What does this mean)
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

“The nursing staff were amazing. They were thoughtful, friendly and it was nice in this situation, with COVID, they’d talk to you and have a laugh. It was really helpful.”

“I was hoping to be able to speak with the surgeon the day before my surgery so I could ask him some questions about the procedure. He came about an hour before my surgery so there wasn’t much time to speak with him.”



# INVOLVED IN MAKING DECISIONS

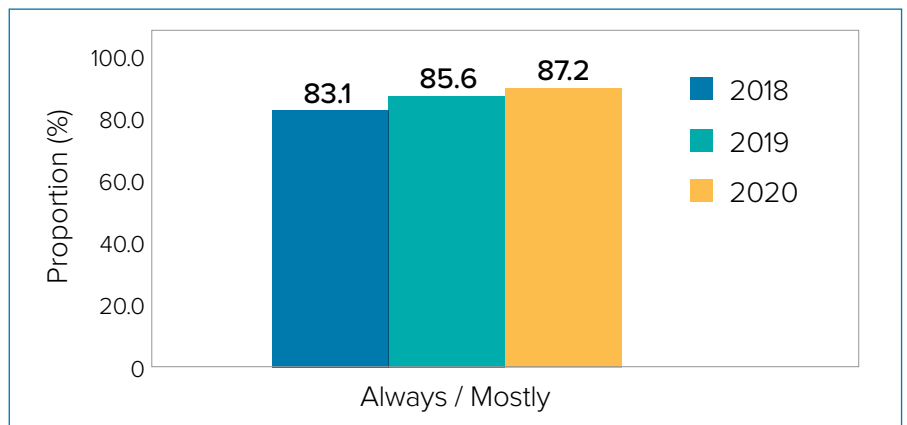
OVER

# 87%

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 felt that they were being involved in making the decisions about their treatment and care always (66.6%) or mostly (20.7%), while only a few thought that it happened rarely (2.8%) or never (2.3%).



What does this mean for the consumer?

FACTOR	DEFINITION (What does this mean)
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

"I was involved in all of the decision making. It was much improved from the previous C-section, mostly because I was listened to and involved in the decision making."

"The doctors and nurses didn't communicate very well or explain things to me and didn't listen when I tried to explain things to them."



# BEING KEPT INFORMED

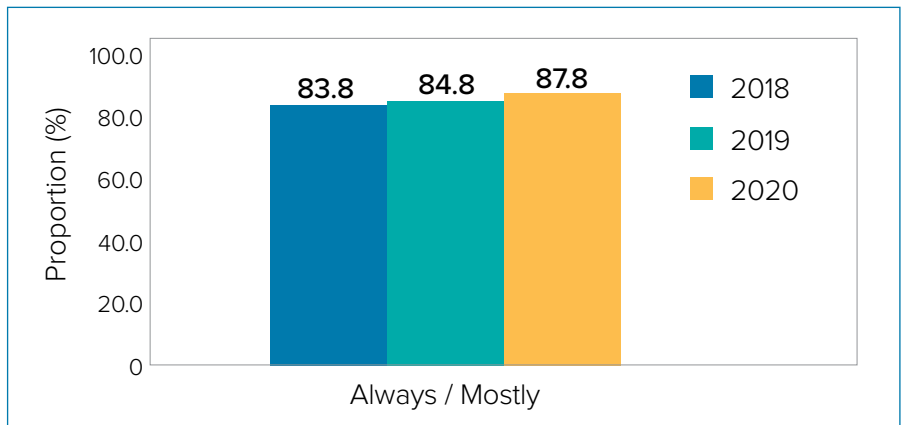
ALMOST

**88%**

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 (67.4%) or mostly (20.4%), while only a few thought that it happened rarely (3.0%) or never (1.7%).



What does this mean for the consumer?

FACTOR	DEFINITION (What does this mean)
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

**Comment from patient's carer, "The way they spoke to her, who has an intellectual disability and is classed as non verbal, was lovely. They told her what was happening and included her. The fact that she wasn't dismissed was a really good thing. One time, she was really hungry and the staff sourced more food for her at teatime which was great."**

**Comment from patient's carer, "Poor communication between him and the staff in hospital. They took him to surgery without him knowing what is going on."**



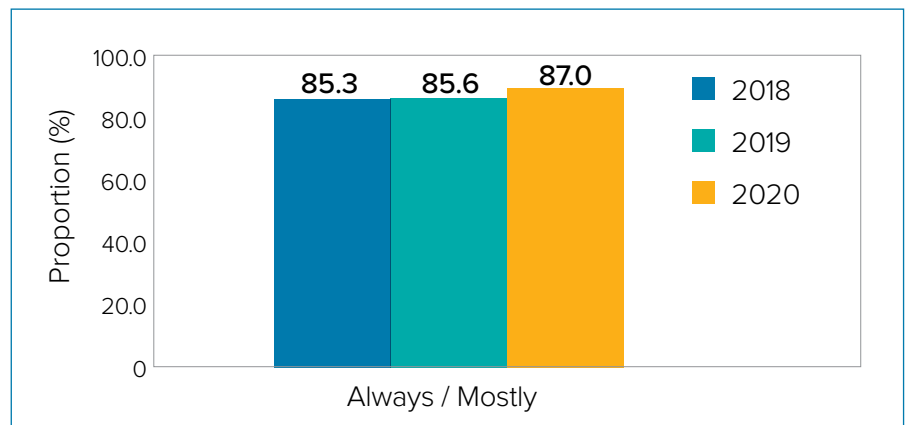
# STAFF COMMUNICATED WITH EACH OTHER

# 87%

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 (64.9%) or mostly (22.2%), while only a few thought that it happened rarely (2.7%) or never (0.9%).



What does this mean for the consumer?

FACTOR	DEFINITION (What does this mean)
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

"I am quite satisfied with the service attitude during the treatment process, and the whole team negotiated and informed me of the treatment plan."

Comment from patient's carer, "Like I said, I asked for an interpreter but there wasn't one available. There was a bit of miscommunication, because I was told that there were two people in emergency who spoke fluent Italian, but nobody showed up to speak with dad. He understands a little bit, but I think there was some miscommunication."



# PAIN RELIEF MET NEEDS

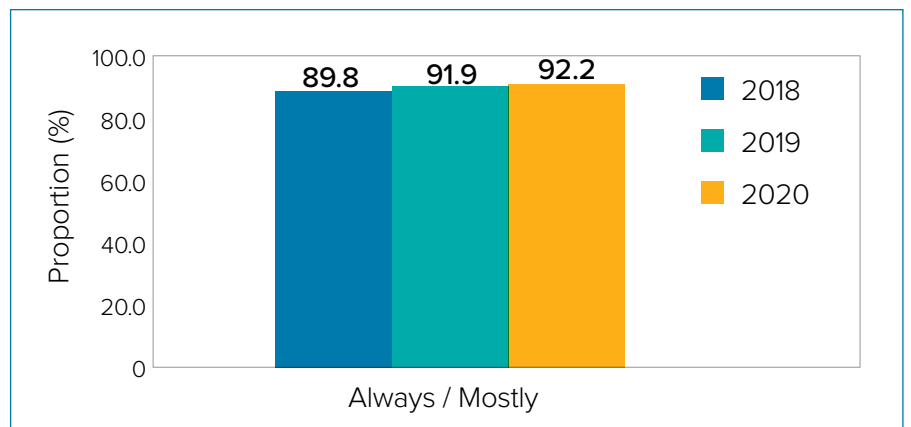
OVER

# 92%

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 (78.3%) or mostly (13.9%), while only a few thought that it happened rarely (2.0%) or never (1.1%).



What does this mean for the consumer?

FACTOR	DEFINITION (What does this mean)
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

“Most of the staff were very, very good to me. I have panic disorder and they really worked on me on a one on one level to help me, gave me medication to calm me down.”

“I was sent home with no pain relief or no instructions on what I should get.”



# FELT CONFIDENT IN SAFETY

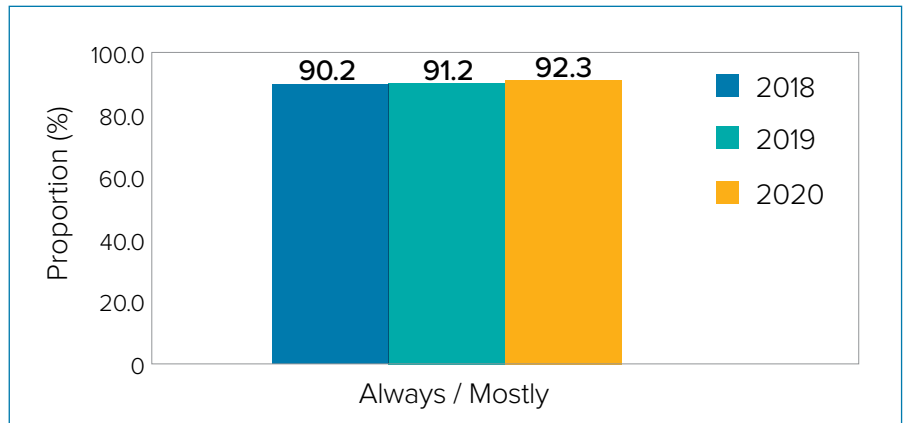
OVER

# 92%

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 always (76.6%) or mostly (15.8%), while only a few thought that it happened rarely (1.8%) or never (1.1%).



What does this mean for the consumer?

FACTOR	DEFINITION (What does this mean)
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

“I was really happy with the professionalism of the staff and the cleanliness of the operating theatre, which gave me confidence in the procedure that I was about to undergo.”

“I thought that the communication between the staff could be improved particularly with handovers as sometimes there was lack of knowledge of what had happened in the previous shift concerning things like diet.”

# HARM OR DISTRESS DISCUSSED WITH STAFF

**85.1%**

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

OF THE

**14.9%**

**that did** experience harm or/and distress:

**1.6%**

had experienced physical harm

**8.6%**

experienced emotional distress

**4.7%**

experienced both

OF THE

**588**

respondents who reported that they had experienced harm or distress:

**45.4%**

said that this was discussed with them

**54.6%**

said that their harm or distress was not discussed with them

**\*Applies when question relating to experiencing harm or distress is answered in the affirmative.**



# OVERALL QUALITY

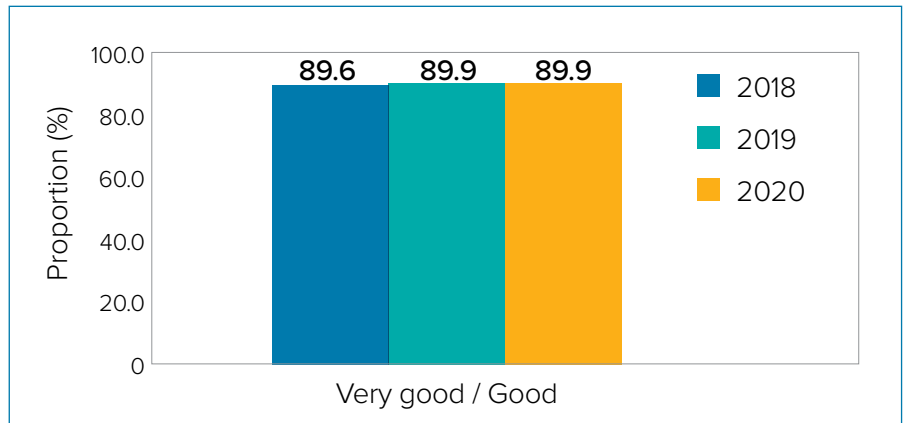
ALMOST

# 90%

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 (63.8%) or good (26.1%), while only a minority thought that it was poor (2.1%) or very poor (1.0%).



What does this mean for the consumer?

FACTOR	DEFINITION (What does this mean)
Overall organisation	Feeling that the health service is well organised overall in relation to treatment and care

We are listening to our consumers

**“Overall I was very pleased with my treatment and care.”**

**“I felt like the principles of patient-centred care were not always adhered to. There wasn’t a lot of communication about what was happening, or significant delays. There just wasn’t a lot of open communication.”**





# 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?

- 63.8%** were **not asked**
- over a quarter (**28.6%**) were asked after admission
- 7.5%** were asked at pre admission.

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

- Of the **508** respondents who required an interpreter, about three quarters (**74.3%**) of patients were **offered access to an interpreter**.

**3** Was your right to have an opinion respected?

- 89.4%** of patients felt that their **right to an opinion was always respected**.

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

- 74.4%** were **given enough information** about their rights as a patient.

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

- 49.2%** had their **rights explained** to them.



OVER  
**94%**

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

## RECOMMEND HOSPITAL

Key themes from consumer feedback on their positive experience in a public city or country hospital:

**2,140**

**satisfied** comments were received







# CONSUMER FEEDBACK

Feedback and complaints are essential and fundamental to developing, managing and improving consumer-centred care.

Consumer, carer and community feedback and complaints provide an opportunity to observe the quality of our health care from their perspective. This helps us to improve the quality of services and identify safety and quality related problems within health care organisations.

In early 2021, the [SA Health Consumer, Carer and Community Feedback and Complaints Management Strategic Framework 2021-2024](#), Guide and Resources were released.

The Framework enables all South Australians to contribute to improving health care services through open communication and shared learning. The Framework ensures mechanisms are in place to:

- > actively manage feedback and complaints
- > better respond to individual feedback and concerns to ensure consumer-centred care
- > identify and rectify system issues
- > develop and improve services.

Broad consultation was undertaken with consumers, carers, families, the community and staff to develop the Framework, guide and resources.

Visit the [SA Health website](#) for the Consumer, Carer and Community Feedback and Complaints Management Framework, Guide and resources.

Our ongoing commitment to surveying South Australians about their overnight experiences in a public metropolitan or country hospital is one of the ways we demonstrate our belief in the importance of consumer, carer and community feedback to inform safety and quality improvement.

**WHEN YOU SHARE YOUR FEEDBACK AND EXPERIENCE, WE WILL:**

- LISTEN** to understand what matters to you
- ACT** to resolve problems and learn from what did not go well
- CHANGE** to improve the quality and experience of your care
- CONTINUE** to look at different ways you can provide feedback to shape the services you need.

Ensure consumer feedback drives quality improvement

# CONSUMER ENGAGEMENT

A key priority of the State Government is to develop a contemporary and sustainable health and wellbeing model, providing South Australians with high quality services focused on consumer-centred care.

Consumers should be partners in decision-making about their own care through a collaborative, respectful and empowering approach.


Our consumers are diverse, and by working closely with them, our services can be co-designed to support patients, carers and families as partners in their own care.

In early 2021, the Minister for Health and Wellbeing released the [Consumer, Carer and Community Engagement Strategic Framework 2021-2025](#). It reinforces SA Health’s commitment

to partnering with consumers, carers and the community in their own care as well as in the planning, co-design, governance, measurement and evaluation of our health services.

The Framework will drive a more consistent and coordinated partnering approach and support health services across LHNs, statewide services and SA Ambulance Service to build closer working relationships with our consumers and carers and to better understand the needs of the local communities.

Read the Consumer, Carer and Community Engagement Strategic Framework by visiting the [SA Health website](#).



### OUR VISION

South Australians are partners in decision-making through a collaborative, transparent, meaningful, respectful and empowering approach.

### OUR MISSION

Consumer, carer and community engagement is essential for health service culture, quality and safety and person-centred care.

### GOALS

Key actions to ensure a sustainable, consumer, carer and community engagement model

1. Consumer-centred comprehensive care
2. Consumer, carer and community-centred communication
3. Partnering in governance and shared decision making
4. Evaluating for safety and quality

### Goals

Five core values setting the standards for consumer, carer and community engagement practices

Inclusive of diversity	Accessible and informed opportunities to participate	Partnering in co-design, planning and evaluation	Systems, strategies and mechanisms for active engagement	Consumer-centred best practice
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## For more information

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