

#### About the Victorian Healthcare Experience Survey

The Victorian Healthcare Experience Survey (VHES) is a state-wide survey of people?s public healthcare experiences. The Ipsos Social Research Institute ? an independent contractor - conducts the survey on behalf of the Victorian Department of Health and Human Services using questionnaires based on the internationally recognised work of the Picker Institute.

The VHES allows a wide range of people to provide feedback on their experiences and provides specialised questionnaires for:

- adult and child inpatients, including parents/guardians
- adult and child emergency department attendees, including parents/guardians
- maternity consumers
- adult and child specialist clinic attendees, including parents/guardians.
- adult community health clients
- adult ambulance service users (both planned and emergency)

The inpatient, emergency, maternity, specialist and ambulance questionnaires are distributed to a randomly selected group of eligible people from each health service in the month following the hospital discharge or the emergency department attendance. Community health questionnaires are distributed to clients while they use a community health service.

Inpatient, emergency and maternity surveys are conducted monthly, while specialist clinics, ambulance and community health surveys are conducted over a three monthly period once annually.

People are able to respond either online or by pen and paper with a freepost return.

Comprehensive quarterly survey results for individual health services are reported through this website. Health Services use these results to direct quality improvement activities.

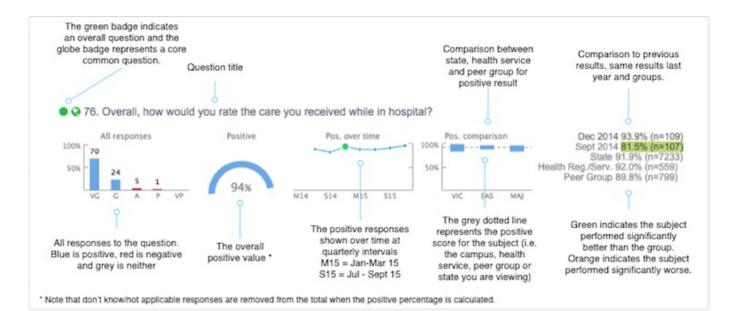
For further information about the VHES please email: vhes@dhhs.vic.gov.au

If you are having technical difficulties with this portal, please view the help page, or contact results@vhes.com.au

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Answers to frequently asked questions and further information about the project's methodology are available in the appendix of this report.

#### The diagram below describes how to interpret each chart



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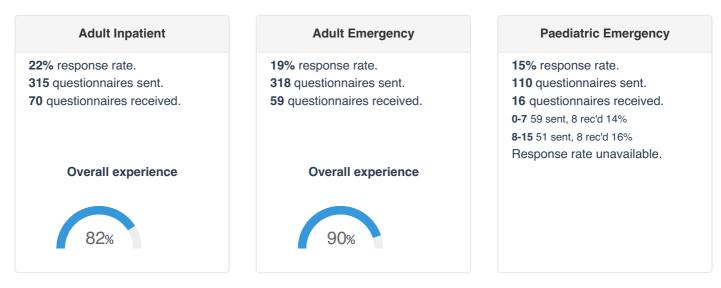
- Overall Experience
- Adult Inpatient
- Adult Emergency
- Paediatric Emergency
- Methodology
- Help

# Footscray Hospital

Footscray Hospital is a member of Western Health health service (WES) and is within the Major peer group (MAJ).

The Major peer group consists of the following campuses Box Hill Hospital Footscray Hospital University Hospital, Geelong Maroondah Hospital The Northern Hospital Frankston Hospital Dandenong Hospital Sunshine Hospital

# Response rates and overall experience

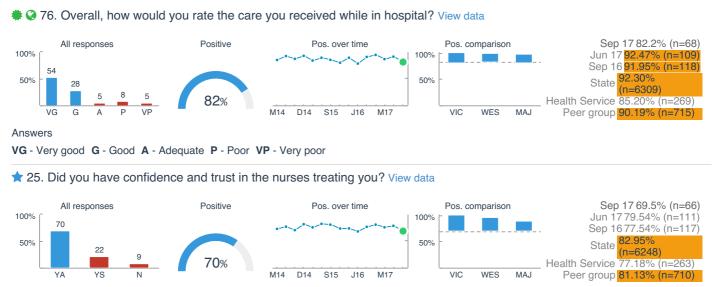


### Overall Experience and Key Aspects of Care

The VHES Adult inpatient questionnaire seeks to discover the experience of people, 16 and over, who have been admitted to one of 116 Victorian public hospitals. Potential respondents are randomly selected from people who were discharged from the health service in the preceding month.

This section features the overall experience question, and the five key aspects of care that were most likely to differentiate a positive overall experience from a negative overall experience for the adult inpatient category.

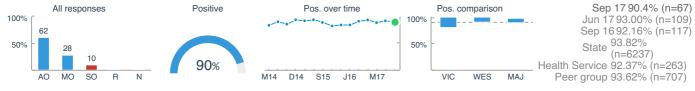
In order to better understand the factors influencing patients' overall experiences in Victorian public hospitals, we asked a range of people to tell the story of their recent healthcare experiences. Videos about care and compassion, information and communication and confidence and trust can be viewed below.



Answers

YA - Yes, always YS - Yes, sometimes N - No

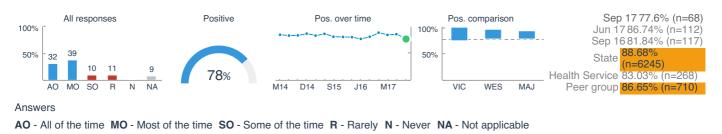
★ ③ 33. How often did the doctors, nurses and other healthcare professionals caring for you explain things in a way you could understand? View data



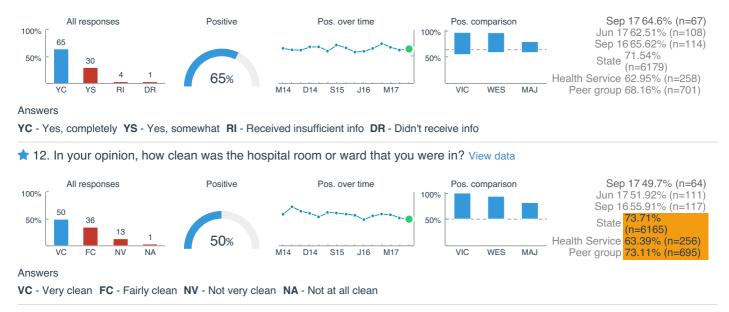
Answers

AO - All of the time MO - Most of the time SO - Some of the time R - Rarely N - Never

time? View data



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### **Core Common Questions**

These are a nationally-endorsed set of hospital-level survey questions and are used for adult inpatients in surveys throughout Australia. In the survey they are marked with a Symbol.

Q 13. How clean were the toilets and bathrooms that you used in hospital? View data



VC - Very clean FC - Fairly clean NV - Not very clean NA - Not at all clean NA - Not applicable

★ 🛇 33. How often did the doctors, nurses and other healthcare professionals caring for you explain things in a way you could understand? View data



AO - All of the time MO - Most of the time SO - Some of the time R - Rarely N - Never

37. Were you involved as much as you wanted to be in decisions about your care and treatment? View data



Answers

YD - Yes, definitely YT - Yes, to some extent N - No NA - Not applicable

39. How much information about your condition or treatment was given to your family, carer or someone close to you? View data



Answers

NE - Not enough TR - The right amount TM - Too much NA - Not applicable TD - They did not want this ID - I didn't want this

#### 40. Did your family or someone close to you have enough opportunity to talk to the staff? View data



YD - Yes, definitely YT - Yes, to some extent N - No ID - I didn't want this TD - They didn't want this

#### Q 41. How would you rate how well the doctors and nurses worked together? View data



E - Excellent VG - Very good G - Good F - Fair P - Poor



#### Answers

AO - All of the time MO - Most of the time SO - Some of the time R - Rarely N - Never NA - Not applicable

# ♦ 43. If you had any worries or fears about your condition or treatment, did a health professional discuss them with you? View data



#### Answers

YD - Yes, definitely YT - Yes, to some extent N - No ID - I didn't raise them ID - I didn't have any

47. Do you think the hospital staff did everything they could to help manage your pain? View data







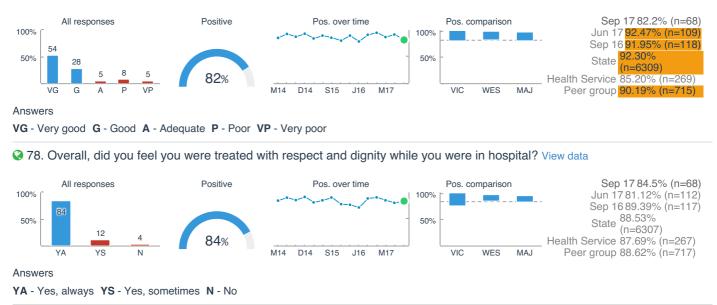
Answers

YC - Yes, completely YS - Yes, somewhat RI - Received insufficient info DR - Didn't receive info



YC - Yes, completely YT - Yes, to some extent N - No ID - I didn't need this

\* 376. Overall, how would you rate the care you received while in hospital? View data



### Spotlight

### Transitions index adult inpatient

The transitions index has been developed with the aim of improving processes relating to discharge planning. It incorporates the average of the positive scores for four adult inpatient questions relating to discharge. The index provides an overview of how hospitals, health services, peer groups and the state are performing in the discharge process.

The transitions index is shown below followed by the four questions that contribute to the index.



n represents the average n across guestions within the Spotlight. View data »

### your health and care at home? View data



YC - Yes, completely YS - Yes, somewhat RI - Received insufficient info DR - Didn't receive info

70. Did hospital staff take your family or home situation into account when planning your discharge? View data



Answers

71. Thinking about when you left hospital, were adequate arrangements made by the hospital for any services you needed? (e.g. transport, meals, mobility aids) View data



YC - Yes, completely YT - Yes, to some extent N - No NA - Not applicable

72. If follow up with your General Practitioner (GP) was required, was he or she given all the necessary information about the treatment or advice that you received while in hospital? View data

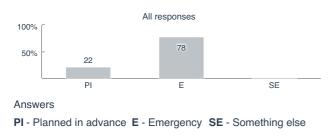


Y - Yes N - No NI - No info was needed FU - Follow up wasn't required

### Admission To Hospital

Patients were asked whether their hospital stay was planned in advance or an emergency.

1. Was this hospital stay planned in advance or an emergency?



### The Emergency Department

In this section, patients who arrived at hospital via the Emergency Department were asked to rate the politeness and courtesy of staff and the care and treatment they received from the doctors and nurses in the ED.

2. How would you rate the politeness and courtesy of staff in the ED? View data



Answers

AR - About right ST - Slightly too long MT - Much too long

4. Overall, how would you rate the care and treatment you received from your doctors in the ED? View data



Answers

VG - Very good G - Good NG - Neither good nor poor P - Poor VP - Very poor

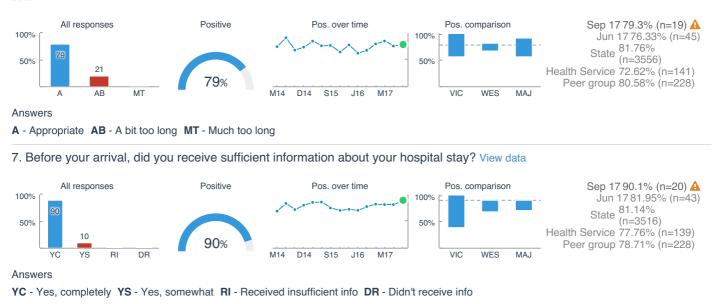
5. Overall, how would you rate the care and treatment you received from your nurses in the ED? View data



### Waiting List Or Planned Admission

Those whose hospital stay was planned in advance were asked how they felt about the length of time they were on the waiting list before their admission to hospital and whether they received sufficient information about their hospital stay before their arrival.

6. How do you feel about the length of time you were on the waiting list before your admission to hospital? View data



### All Types Of Admission

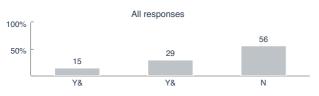
8. Do you think the time you had to wait from arrival at hospital until you were taken to your room or ward was...? View data



### The Hospital & Ward

This section explored the physical environment of the hospital and ward. Patients were asked about the cleanliness of their ward and the toilets and whether hand-wash gels were available for patients and visitors. They were also asked if they shared a room with a patient of the opposite sex.

10. During your hospital stay, did you share a room with a patient of the opposite sex?



Answers

Y& - Yes & this was a concern  $\ensuremath{\sc Y\&}$  - Yes & this was not a concern  $\ensuremath{\,N}$  - No

11. During your hospital stay, were you ever bothered by any of the following? (Please select all that apply) View data



Answers

Y - Yes TW - They were empty ID - I did not see any DK - Don?t know

### 15. Did you feel friends and family were welcome to visit you? View data



YA - Yes, always YS - Yes, sometimes N - No NA - Not applicable

### Food

In this section, patients were asked whether the hospital food was suitable for their dietary needs and whether they received enough help from staff to eat their meals. Patients were also asked to rate the hospital food.

16. How would you rate the hospital food? View data



VG - Very good G - Good NG - Neither good nor poor P - Poor VP - Very poor NA - Not applicable

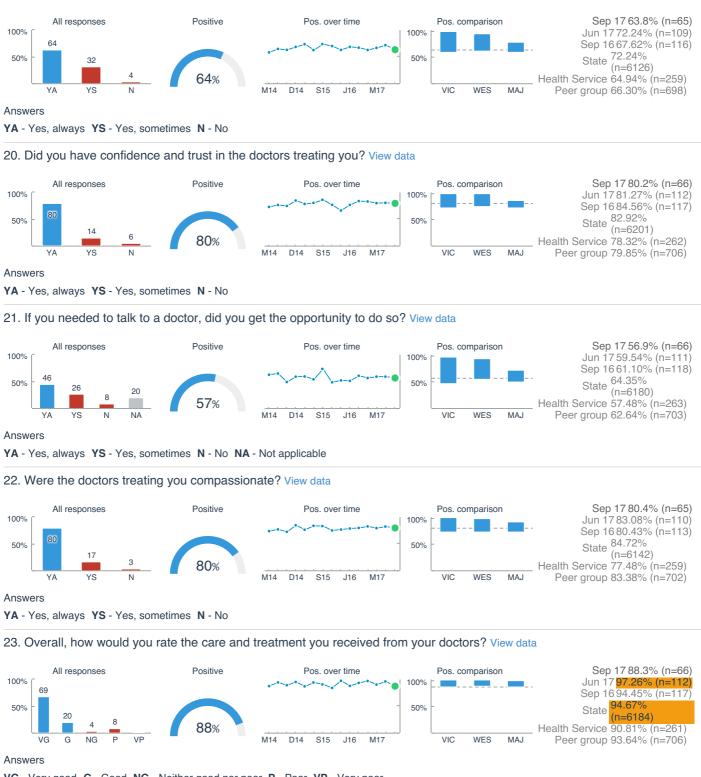
17. Was the hospital food suitable for your dietary needs (for example medical, cultural, or religious needs or personal preference)? View data



### Your Doctors

This section covers the care provided specifically by doctors. It includes whether the patient felt that the doctors treating them knew enough about their medical history and whether they had confidence and trust in these doctors. Patients were also asked about the doctors' compassion, and to rate the care they received from doctors overall.

19. During your hospital stay, did the doctors who treated you know enough about your medical history? View data



VG - Very good G - Good NG - Neither good nor poor P - Poor VP - Very poor

### Your Nurses

This section covers the care provided specifically by nurses. It included questions about nurses' knowledge of patients' condition and treatment and patients' feelings of confidence and trust in nurses. Patients were also asked whether the nurses treated them compassionately and to rate the treatment they received from the nurses.

24. During your hospital stay, did the nurses who treated you know enough about your condition and treatment? View data



### 29. Overall, how would you rate the care and treatment you received from your nurses? View data

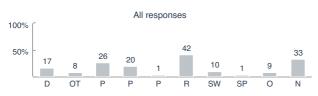




### Other Healthcare Professionals

In this section, patients were asked about the quality of care and treatment they received from health professionals other than doctors and nurses.

30. Which, if any, of the following other healthcare professionals did you receive care or treatment from during this hospital stay? (Please select all that apply)



Answers

D - Dietician OT - Occupational Therapist P - Pharmacist P - Physiotherapist P - Psychologist R - Radiographer SW - Social worker SP - Speech Pathologist O - Other N - None

31. Overall, how would you rate the care and treatment you received from these other healthcare professionals? View data



### Your Care

This section covers care provided by all health professionals to patients during their hospital stay. Patients were asked whether the staff treating and examining them introduced themselves and their role and how often doctors, nurses and other healthcare professionals explained thing in a way the patient could understand. Questions also covered the behaviour of the hospital staff, including whether they talked about the patient as if they weren't there and whether they cleaned their hands or put on gloves before examining the patient. Patients were also asked how much information was given to them and their relatives about their condition and treatment and whether they received emotional support and assistance from hospital staff during their stay.

32. Did the staff treating and examining you introduce themselves and their role? View data



Answers

YA - Yes, all staff SS - Some staff VF - Very few / none

★ ③ 33. How often did the doctors, nurses and other healthcare professionals caring for you explain things in a way you could understand? View data



AO - All of the time MO - Most of the time SO - Some of the time R - Rarely N - Never

34. While you were in hospital, did hospital staff talk about you as if you weren?t there? View data



Answers

YO - Yes, often YS - Yes, sometimes N - No

35. Did you see hospital staff wash their hands, use hand gel to clean their hands, or put on clean gloves before examining you? View data



36. Sometimes in a hospital, a member of staff will say one thing about your care and another will say something quite different. Did this happen to you? View data



37. Were you involved as much as you wanted to be in decisions about your care and treatment? View data



Answers

YD - Yes, definitely YT - Yes, to some extent N - No NA - Not applicable







39. How much information about your condition or treatment was given to your family, carer or someone close to you? View data



Answers

NE - Not enough TR - The right amount TM - Too much NA - Not applicable TD - They did not want this ID - I didn't want this

40. Did your family or someone close to you have enough opportunity to talk to the staff? View data



E - Excellent VG - Very good G - Good F - Fair P - Poor



AO - All of the time MO - Most of the time SO - Some of the time R - Rarely N - Never NA - Not applicable

Q 43. If you had any worries or fears about your condition or treatment, did a health professional discuss them with you? View data



RIISWEIS

YD - Yes, definitely YT - Yes, to some extent N - No ID - I didn't raise them ID - I didn't have any

44. Do you feel you received enough emotional support from hospital staff during your stay? View data



YA - Yes, always YS - Yes, sometimes N - No NA - Not applicable

45. Were you given enough privacy when being examined or treated? View data



YA - Yes, always YS - Yes, sometimes N - No

46. At other times during your hospital stay did you have enough privacy? View data



YA - Yes, always YS - Yes, sometimes N - No

47. Do you think the hospital staff did everything they could to help manage your pain? View data

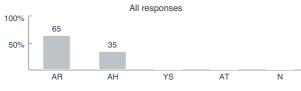


YD - Yes, definitely YT - Yes, to some extent N - No NA - Not applicable

#### 48. Do you need any help understanding English? View data



49. When you were in hospital, was there someone who could interpret for you?



#### Answers







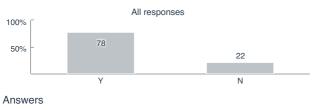


YC - Yes, completely YS - Yes, somewhat RI - Received insufficient info DR - Didn't receive info NA - Not applicable

### Tests

This section covers any tests (such as X-rays or scans) experienced by patients during their hospital stay. Those who received tests were asked whether a staff member explained why the patient needed the tests and the results of the tests in a way they could understand.





Y-Yes N-No





Answers

YC - Yes, completely YT - Yes, to some extent N - No NA - Not applicable

### Your Treatments

In this section, patients were asked about any treatments (such as injections, dressings or physiotherapy) they experienced while in hospital. Questions covered whether the purpose of any treatments they received was explained to them and whether they felt that they could refuse any treatment that they did not agree with or want. Patients were also asked whether their permission was sought if any students accompanied any health professionals and whether they were comfortable with the students' presence.

55. Did hospital staff explain the purpose of any treatments (e.g. an injection, dressing, physiotherapy) before these were administered? View data



Answers

YA - Yes, always YS - Yes, sometimes N - No ID - I didn't want this NA - Not applicable

56. Did you feel you could refuse any treatment that you did not agree with or did not want? View data





YC - Yes, completely YT - Yes, to some extent N - No NA - Not applicable

57. Sometimes, students accompany health professionals when they are treating or examining patients. If this happened to you, was your permission sought? View data



#### Answers



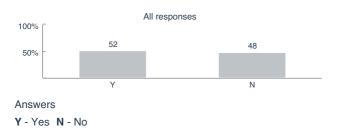
58. Were you comfortable with the presence of students? View data



### **Operations & Procedures**

Patients who had an operation or procedure while in hospital were asked whether a staff member explained what would be done and how the procedure went in a way that they could understand.

59. During your stay in hospital, did you have an operation or procedure?



60. Before your operation or procedure, did a member of hospital staff explain what would be done in a way that you could understand? View data



#### Answers

YC - Yes, completely YT - Yes, to some extent N - No NA - Not applicable

61. During your hospital stay, did a member of staff explain how your operation or procedure had gone in a way you could understand? View data

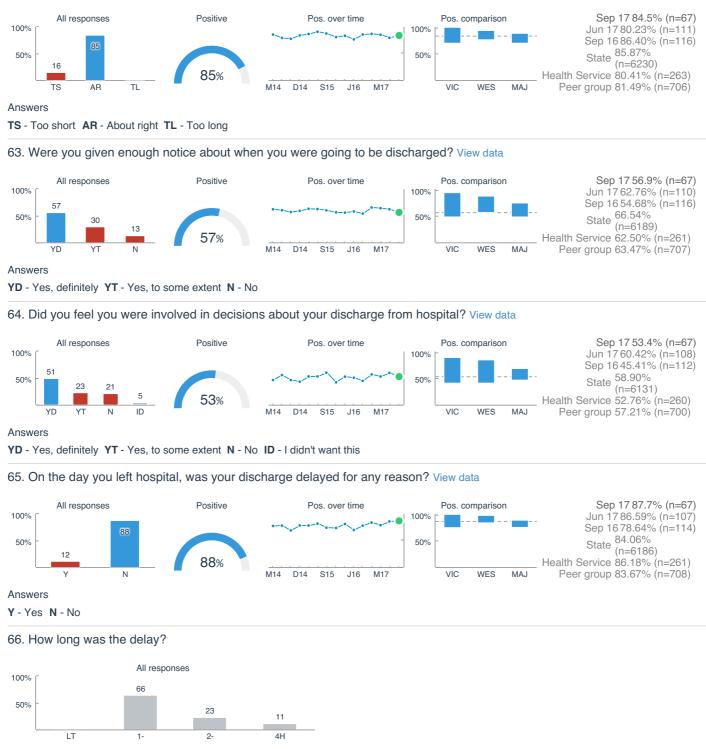


YC - Yes, completely YT - Yes, to some extent N - No NA - Not applicable

### Leaving Hospital

This section covers the discharge process. Patients were asked about how they felt about the length of their hospital stay, whether they were given enough notice about when they were going to be discharged and about any delays they faced. In addition, questions also covered whether the patient was given enough information about managing their health and care at home and whether their family/home situation was taken into account when planning their discharge. Patients were also asked to rate the discharge process.





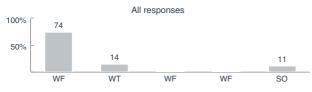
#### Answers

LT - Less than 1 hour 1- - 1 - 2 hours 2- - 2 - 4 hours 4H - 4 hours or longer

67. Did a member of staff explain the reason for the delay? View data

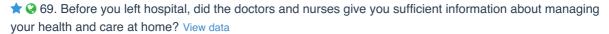


68. What was the reason or reasons for the delay? (Please select all that apply)



#### Answers





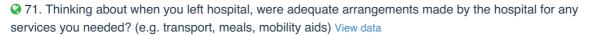


YC - Yes, completely YS - Yes, somewhat RI - Received insufficient info DR - Didn't receive info

70. Did hospital staff take your family or home situation into account when planning your discharge? View data



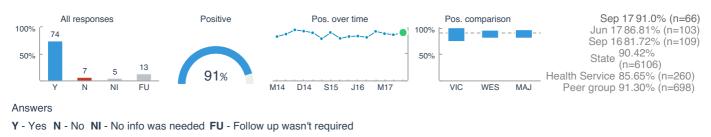
YC - Yes, completely YT - Yes, to some extent N - No NA - Not applicable





YC - Yes, completely YT - Yes, to some extent N - No ID - I didn't need this

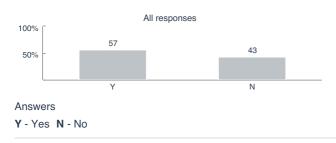
72. If follow up with your General Practitioner (GP) was required, was he or she given all the necessary information about the treatment or advice that you received while in hospital? View data



73. Did you receive copies of communications sent between hospital doctors and your GP? View data



75. Did you have any follow up with the doctors or other health professionals you saw while in hospital after you were discharged?



### Overall

This section covers patient's overall feelings about their experience, including whether they felt they were treated with respect and dignity and were listened to and understood by the people looking after them. Questions also asked the patients to rate the care they received and whether they felt that they were treated unfairly.



\* I the care you received while in hospital? View data



YΔ

YA - Yes, always YS - Yes, sometimes N - No

YS

N

78. Overall, did you feel you were treated with respect and dignity while you were in hospital? View data

M14 D14 S15



J16 M17

VIC

WES

MA.I

Peer group 76.55% (n=713)

Answers

79. Were you ever treated unfairly for any of the reasons below? (Please select all that apply) View data



Answers

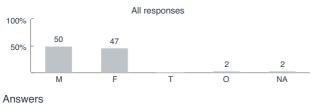
YA - Your age YS - Your sex YE - Your ethnic background YR - Your religion YS - Your sexual orientation AD - A disability that you have MS - Marital status SE - Something else IW - I was not treated unfairly

YA - Yes, always YS - Yes, sometimes N - No

### About You

This section covers general demographic questions about the patient. These included year of birth, gender, main language spoken and Aboriginal/Torres Strait Islander status. Patients were also asked a number of questions about their health, including how often in the last twelve months they had been admitted as an inpatient and any long standing medical conditions they have.

80. What is your gender?

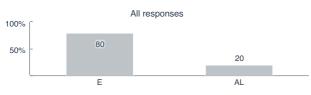


M - Male F - Female T - Transgender O - Other NA - Would prefer not to say

81. Average age of patient

# The average age of the patient was 68

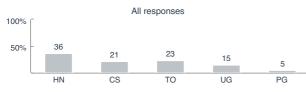
#### 82. Which language do you mainly speak at home?



Answers







#### Answers

HN - Have not completed secondary school CS - Completed secondary school TO - Trade or technical certificate or diploma UG - University graduate PG - Post graduate / higher degree

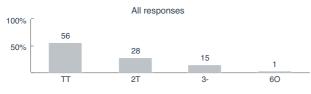
84. Are you of Aboriginal origin, Torres Strait Islander origin, or both?



Answers

YA - Yes, Aboriginal YT - Yes, Torres Strait Islander YB - Yes, both Aboriginal and Torres Strait Islander N - No

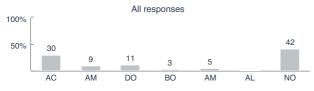
#### 85. How many times in the last 12 months have you been admitted as an inpatient to this hospital?



Answers

TT - This time only 2T - 2 times 3- - 3 - 5 times 60 - 6 or more times

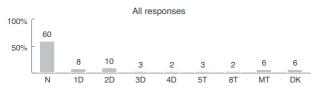
86. Which, if any, of the following long-standing conditions do you have? (Please select all that apply)



#### Answers

AC - A chronic illness AM - A mobility impairment DO - Deafness or hearing impairment BO - Blindness or vision impairment AM - A mental health condition AL - A learning disability NO - None of these

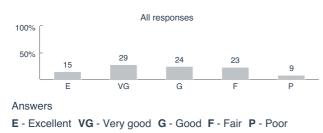
87. Thinking about the month leading up to your hospital stay, how many days did illness or injury keep you in bed for all or a substantial part of the day?



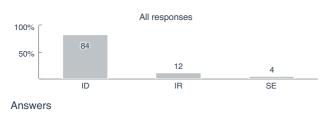
#### Answers

N - None 1D - 1 day 2D - 2 days 3D - 3 days 4D - 4 days 5T - 5 to 7 days 8T - 8 to 10 days MT - More than 10 days DK - Don't know

88. In general, how would you rate your health?



#### 89. Who completed this questionnaire?

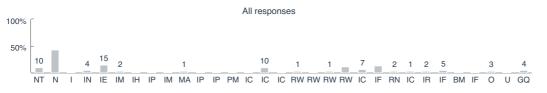


ID - I did (the patient) IR - I received help from someone else SE - Someone else on my behalf

### Other Comments

This section allowed the patients to suggest ways that they felt the hospital could improve their care and services and to list the best and worst things about their stay in the hospital.

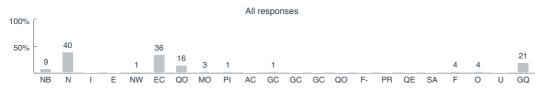
90. What could the hospital do to improve the care and services it provides to better meet the needs of patients?



#### Answers

NT - Nothing N - None I - Incomprehensible IN - Staff numbers IE - Emotional / interpersonal care IM - Medical treatment IH - Handwashing
IP - Patient involvement in care IM - Follow-up or communication with GP MA - Length of stay IP - Patient safety IP - Privacy
PM - Provide more information IC - Communication between staff and family / friends / carers IC - Communication between staff and patient
IC - Communication / collaboration between staff members RW - Wait times (waiting list) RW - Wait times (ED) RW - Wait times (discharge)
RW - Wait times (other) IC - Cleanliness IF - Facilities RN - Reduce noise IC - Car parking IR - Room sharing protocol IF - Food quality
BM - Meeting dietary needs IF - Food quantity O - Other U - Unclear GQ - Staff quality

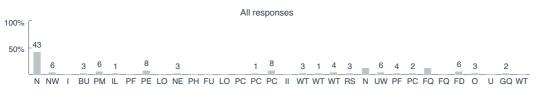
#### 91. What were the best things about your stay in hospital?



Answers

NB - Nothing N - None I - Incomprehensible E - Everything NW - Wait times EC - Emotional / interpersonal care QO - Medical treatment
 MO - Medical outcome PI - Patient involvement in care AC - A chance to rest / recover GC - Communication between staff and patient
 GC - Communication between staff and family / friends / carers GC - Communication / collaboration between staff members
 QO - Information quality F- - Facilities - general PR - Private rooms / good room sharing QE - Quiet / relaxed environment SA - Social aspect
 F - Food O - Other U - Unclear GQ - Staff quality

#### 92. What were the worst things about your stay in hospital?



Answers

N - None NW - Nothing I - Incomprehensible BU - Being unwell / in hospital PM - Medical treatment IL - Length of stay
PF - Follow-up or communication with GP PE - Emotional / interpersonal care LO - Lack of patient involvement in care NE - Not enough staff
PH - Poor handwashing FU - Felt unsafe LO - Lack of privacy PC - communication between staff and family / friends / carers
PC - Communication between staff and patient PC - Communication / collaboration between staff members II - Insufficient information
WT - Wait times (ED) WT - Wait times (discharge) WT - Wait times (other) RS - Room sharing N - Noise UW - Unclean ward / bathrooms
PF - Facilities PC - Car-parking FQ - Food quality FQ - Food quantity FD - Food did not meet dietary needs O - Other U - Unclear
GQ - Staff quality WT - Wait times (waiting list)

## Overall Experience and Key Aspects of Care

The VHES adult Emergency Department questionnaire seeks to discover the experience of people over 16 who have attended one of Victoria's 36 Emergency Departments but were not admitted to hospital. Potential respondents are randomly selected from people who visited the ED in the preceding month.

This section features the overall experience question, and the five key aspects of care that were most likely to differentiate a positive overall experience from a negative overall experience for the adult emergency category.

In order to better understand the factors influencing patients' overall experiences in Victorian public hospitals, we asked a range of people to tell the story of their recent healthcare experiences. A video about the emergency experience can be viewed below.







Answers

YD - Yes, definitely YT - Yes, to some extent N - No

★ 23. Did you have confidence and trust in the doctors treating you? View data



YA - Yes, always YS - Yes, sometimes N - No

★ 36. While you were in the ED, did you receive sufficient information about your condition and treatment? View data



YC - Yes, completely YS - Yes, somewhat RI - Received insufficient info ID - I didn't receive info

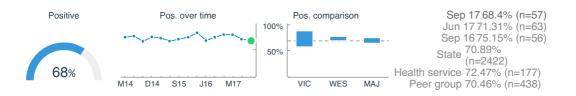
★ 30. In your opinion, were there enough nurses and doctors on duty to care for you in the ED? View data



## Spotlight

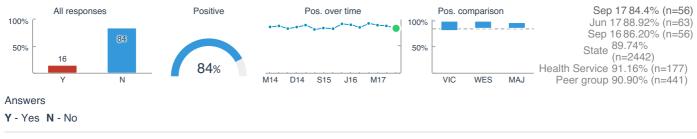
## Transitions index adult emergency

The transitions index has been developed with the aim of improving the departure process from the emergency department. It incorporates the average of the positive scores for four adult emergency questions relating to leaving the emergency department. The index provides an overview of how hospitals, health services, peer groups and the state are performing in this process.

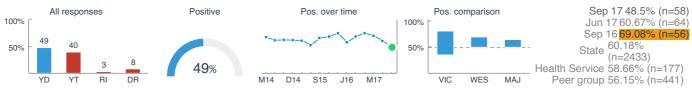


n represents the average n across questions within the Spotlight. View data »

### 60. When you were ready to leave the ED, were you delayed for any reason? View data



64. Before you left the ED, did the doctors and nurses give you sufficient information about managing your health and care at home? View data



#### Answers

65. Did hospital staff take your family or home situation into account when you were leaving the ED? View data



Answers

YC - Yes, completely YT - Yes, to some extent N - No NA - Not applicable

66. If follow up with your General Practitioner (GP) was required, was he or she given all the necessary information about the treatment or advice that you received in the ED? View data

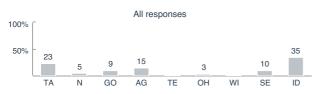


YD - Yes, definitely YT - Yes, to some extent RI - Received insufficient info DR - Didn't receive info

## Arrival At The Emergency Department

In this section, patients were asked who advised them to go to the Emergency Department (ED), their method of travel to the ED and whether the ED was easy to find.

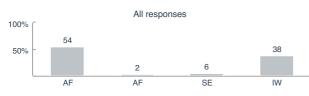
1. Who advised you to go to the Emergency Department (ED)? (If more than one option applies, select the main source of advice)



#### Answers

TA - The ambulance service N - Nurse-on-call GO - GP out of hours service AG - A GP at a surgery TE - The ED by phone OH - Other health professional WI - Website information SE - Somebody else ID - I decided

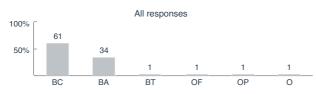




Answers

AF - A family member AF - A friend SE - Someone else IW - I went alone to the ED

3. How did you travel to the ED?



Answers

BC - By car BA - By ambulance BT - By taxi OF - On foot OP - On public transport O - Other

### 4. How would you rate the car-parking at the hospital? View data



Answers

VG - Very good G - Good NG - Neither good nor poor P - Poor VP - Very poor

### 5. Was the ED easy to find? View data



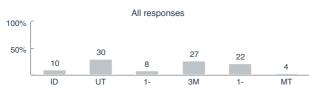
## Ambulance

In this section, those patients who arrived at the ED by ambulance were asked how well the ambulance service and ED staff worked together and how long they waited with the ambulance crew before being handed over to the ED staff. They were also asked what happened after they arrived at the ED.

6. How well do you think the ambulance service and ED staff worked together? View data



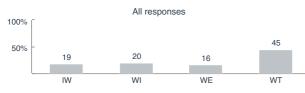
7. Once you arrived at hospital, how long did you wait with the ambulance crew before your care was handed over to the ED staff?



Answers

ID - I did not have to wait UT - Up to 15 minutes 1- - 16 - 30 minutes 3M - 30 minutes - 1 hour 1- - 1 - 2 hours MT - More than 2 hours





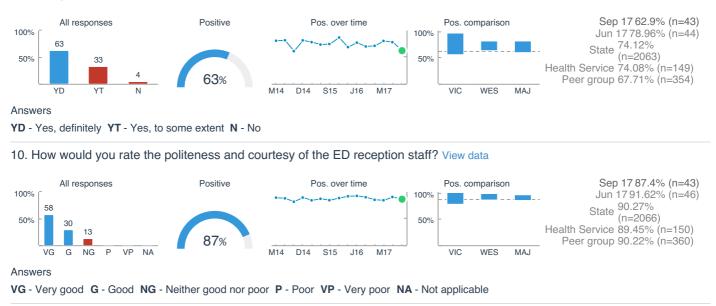
#### Answers

IW - I went to reception WI - Waited in waiting area WE - Waited elsewhere WT - Went to a cubicle / room

## Reception

In this section, patients were asked whether it was clear who to talk to when they first arrived at the ED and to rate the politeness and courtesy of the reception staff.

9. When you first arrived at the ED, was it clear who to talk to? View data



## Waiting

This section covers the patient?s experience in the waiting area. It includes length of wait, communication and care while waiting, the cleanliness and comfort of the waiting room, and how long they waited to be examined after being transferred to a cubical or room.

### 11. Overall, how long did you spend in the waiting area?



Answers

ID - I did not have to wait 1- - 1 - 30 minutes 3- - 31 - 60 minutes 1- - 1 - 2 hours 2- - 2 - 4 hours MT - More than 4 hours



Answers

VC - Very crowded SC - Somewhat crowded NC - Not crowded





Answers

Y& - Yes & wait was longer Y& - Yes & wait was shorter Y& - Yes & accurately NI - No, I was not told

14. Were you provided with updated information on how long you would have to wait in the waiting area? View data

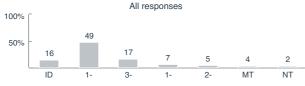




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### 16. While you were waiting, did ED staff check on your condition? View data





### Answers

ID - I did not have to wait 1- - 1 - 30 minutes 3- - 31 - 60 minutes 1- - 1 - 2 hours 2- - 2 - 4 hours MT - More than 4 hours NT - Never transferred

## Your Doctors

This section covers the care provided specifically by doctors. Patients were asked whether they had enough time to discuss their health with a doctor in the ED, whether they had confidence and trust in the doctors treating them, whether they felt they were treated with compassion, and to rate the care and treatment received from doctors overall.

22. Did you have enough time to discuss your health or medical problem with a doctor in the ED? View data



## Your Nurses

This section covers the care provided specifically by nurses. Patients were asked to rate the nurses? knowledge of their condition and treatment, their confidence and trust in the nurses, whether or not the nurses were compassionate, and the overall care and treatment received.

26. In your opinion, did the nurses who treated you in the ED know enough about your condition and treatment? View data



## Your Care And Treatment

This section covers care provided by all health professionals to patients during their ED visit. Patients were asked whether there were enough doctors and nurses on duty to care for them and whether staff introduced themselves and explained things in a way they could understand. Questions also covered hand washing, the consistency and sufficiency of information, the availability of staff, emotional support, privacy, pain management and services provided in a language other than English.

★ 30. In your opinion, were there enough nurses and doctors on duty to care for you in the ED? View data



Answers

YA - Yes, all staff SS - Some staff VF - Very few / none

32. How often did the doctors, nurses and other healthcare professionals caring for you explain things in a way you could understand? View data



Answers

AO - All of the time MO - Most of the time SO - Some of the time R - Rarely N - Never

33. Did you see ED staff wash their hands, or use hand gel to clean their hands, or put on clean gloves before examining you? View data



Answers

YA - Yes, always YS - Yes, sometimes N - No DK - Don't know

34. Sometimes in a hospital, a member of staff will say one thing about your care and another will say something quite different. Did this happen to you in the ED? View data



35. Were you involved, as much as you wanted to be, in decisions about your care and treatment? View data



YD - Yes, definitely YT - Yes, to some extent N - No NA - Not applicable

★ 36. While you were in the ED, did you receive sufficient information about your condition and treatment? View data



#### Answers

YC - Yes, completely YS - Yes, somewhat RI - Received insufficient info ID - I didn't receive info

# 37. If you needed assistance, were you able to get a member of staff to help you within a reasonable time? View data



#### Answers

AO - All of the time MO - Most of the time SO - Some of the time R - Rarely N - Never ID - I did not need assistance

# 38. At any point, did you ever feel worried that staff in the ED had forgotten about you? (Please select all that apply) View data



#### Answers

YI - Yes, in the waiting area YI - Yes, in a cubicle / room YE - Yes, elsewhere N - No

39. If you had any worries or fears about your condition or treatment, did a health professional discuss them with you? View data



#### Answers

YD - Yes, definitely YT - Yes, to some extent N - No ID - I didn't raise them ID - I didn't have any

★ 40. Do you feel you received enough emotional support from hospital staff during your stay? View data



YA - Yes, always YS - Yes, sometimes N - No NA - Not applicable

### 41. Were you given enough privacy when being examined or treated? View data



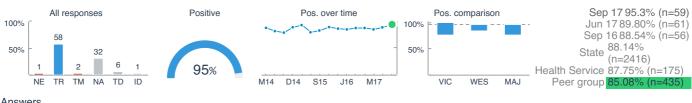
YD - Yes, definitely YT - Yes, to some extent N - No



Answers



43. How much information about your condition or treatment was given to your family, carer or someone close to you? View data



Answers

NE - Not enough TR - The right amount TM - Too much NA - Not applicable TD - They didn't want this ID - I didn't want this

44. Did you receive sufficient information about any medication you were given while in the ED (e.g. purpose, side effects and how to administer the medication)? View data



#### Answers

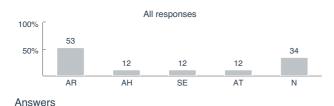
YC - Yes, completely YS - Yes, somewhat RI - Received insufficient info DR - Didn't receive info NA - Not applicable





Y-Yes N-No

46. When you were in the ED, was there someone who could interpret for you? (Please select all that apply)



AR - A relative or friend AH - A hospital interpreter SE - Someone else on hospital staff AT - A telephone interpreter N - No

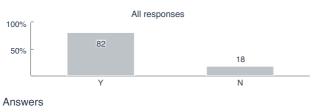
47. Were you given any information (e.g. leaflets, other types of media) in a language you can understand? View data



### Tests

This section covers any tests (such as X-rays or scans) experienced by patients during their hospital stay. Those who received tests were asked whether a staff member explained why the patient needed the tests and the results of the tests in a way they could understand.





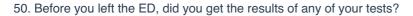
Y-Yes N-No

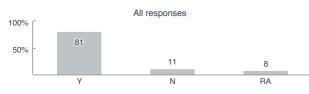




Answers

YD - Yes, definitely YT - Yes, to some extent N - No





Answers



51. Did a member of staff explain the results of these tests in a way you could understand? View data



YD - Yes, definitely YT - Yes, to some extent N - No

## Hospital Environment And Facilities

This section explored the physical environment of the ED. Patients were asked about the cleanliness of the ED and toilets, hand washing, way finding, safety and access to food and drinks.

52. In your opinion, how clean was the ED? View data



Answers

VC - Very clean FC - Fairly clean NV - Not very clean NA - Not at all clean NA - Not applicable

54. Were hand-wash gels available for patients and visitors to use? View data



Answers

Y - Yes TW - They were empty ID - I did not see any DK - Don?t know

55. During your visit to the ED, were you ever bothered by any of the following? (Please select all that apply) View data



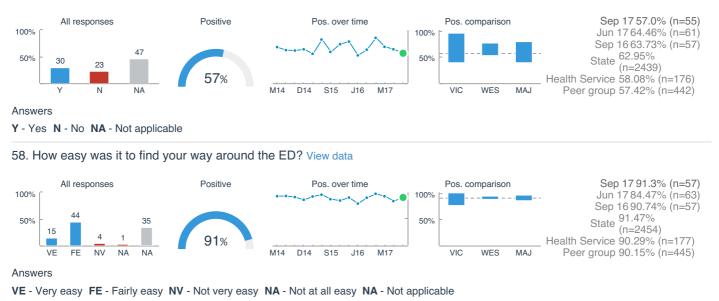
Answers

OP - Other patients' noise HS - Hospital staff noise VN - Visitors' noise EN - Equipment noise ON - Other noise L - Lighting NO - None of the above

56. While you were in the ED, did you feel threatened by other patients or visitors? View data



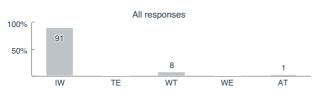
57. Were you able to access suitable food or drinks when you were in the ED, if you wanted to? View data



## Leaving The Emergency Department

In this section, patients were asked what happened at the end of their ED visit, the length and reason for any delays in leaving, and whether they received sufficient information and support prior to leaving.





Answers



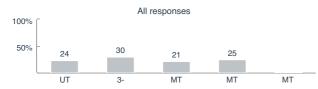
60. When you were ready to leave the ED, were you delayed for any reason? View data



Answers

Y-Yes N-No

### 61. How long was the delay in leaving the ED?



Answers

UT - Up to 30 minutes 3- - 31 - 60 minutes MT - More than 1 hour but no more than 2 hours MT - More than 2 hours but no more than 4 hours MT - More than 4 hours

### 62. Did a staff member explain the reason for the delay? View data



YD - Yes, definitely YT - Yes, to some extent N - No

63. What was the main reason for the delay? (Select one only ? if more than one option applies, select the main reason)



Answers

WF - Wait for medicines WT - Wait to see the doctor WF - Wait for transport WF - Wait for GP letter WF - Wait for test results

SO - Some other reason

64. Before you left the ED, did the doctors and nurses give you sufficient information about managing your health and care at home? View data



#### Answers

YD - Yes, definitely YT - Yes, to some extent RI - Received insufficient info DR - Didn't receive info

65. Did hospital staff take your family or home situation into account when you were leaving the ED? View data



### Answers

YC - Yes, completely YT - Yes, to some extent N - No NA - Not applicable

# 66. If follow up with your General Practitioner (GP) was required, was he or she given all the necessary information about the treatment or advice that you received in the ED? View data



## Overall

This section covers patients? overall feelings about their ED experience, including whether they were treated with respect and dignity and listened to and understood by hospital staff. They were also asked to rate the care they received overall, and whether they were treated unfairly for any reason.

67. Overall, did you feel you were treated with respect and dignity while you were in the ED? View data

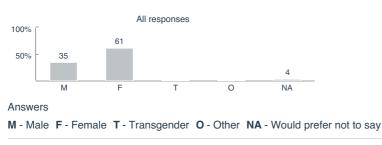


SE - Something else N - No

## About You

This section covers general demographic questions about the patient. These included year of birth, gender, main language spoken and Aboriginal/Torres Strait Islander status. Patients were also asked a number of questions about their health, including how often in the last twelve months they had visited the ED and any long standing medical conditions they have.





72. Average age of patient

The average age of the patient was

54

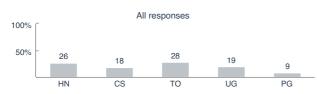
73. Which language do you mainly speak at home?



Answers

E - English AL - A language other than English

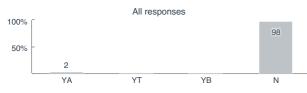




#### Answers

HN - Have not completed secondary school CS - Completed secondary school TO - Trade or technical certificate or diploma UG - University graduate PG - Post graduate / higher degree

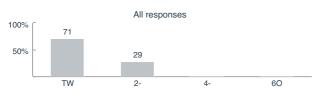
75. Are you of Aboriginal origin, Torres Strait Islander origin, or both?



#### Answers



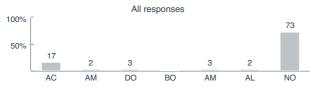
### 76. How many times (including this one) have you visited this ED as a patient in the last 12 months?



#### Answers

TW - This was the only time 2- - 2 - 3 times 4- - 4 - 5 times 60 - 6 or more times

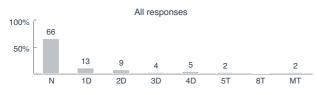
77. Which, if any, of the following long-standing conditions do you have? (Please select all that apply)



#### Answers

AC - A chronic illness AM - A mobility impairment DO - Deafness or severe hearing impairment BO - Blindness or severe vision impairment AM - A mental health condition AL - A learning disability NO - None of these

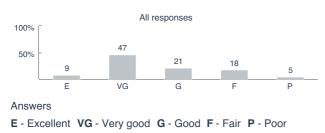
78. Thinking about the month leading up to your ED visit, how many days did illness or injury keep you in bed for all or a substantial part of the day?



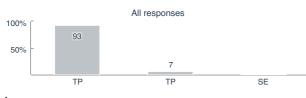
#### Answers

N - None 1D - 1 day 2D - 2 days 3D - 3 days 4D - 4 days 5T - 5 to 7 days 8T - 8 to 10 days MT - More than 10 days

### 79. In general, how would you rate your health?



### 80. Who completed this questionnaire?



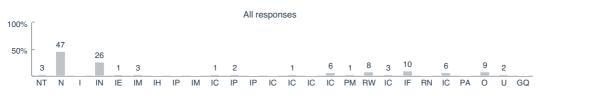
#### Answers

TP - The patient TP - The patient with help from someone else SE - Someone else on behalf of the patient

## Any Other Comments

This section allowed the patients to suggest ways that they felt the emergency department could improve their care and services and to list the best and worst things about their visit to the ED.

81. What could the ED do to improve the care and services it provides to better meet the needs of patients?



#### Answers

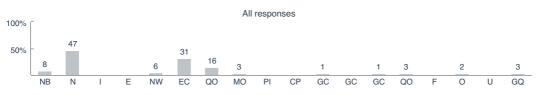
NT - Nothing N - None I - Incomprehensible IN - Staff numbers IE - Emotional / interpersonal care IM - Medical treatment IH - Handwashing IP - Patient involvement in care IM - Follow-up or communication with GP IC - Care while waiting IP - Patient safety IP - Privacy

IC - Communication between staff and patient family / friends / carers IC - Communication between staff and patient

IC - Communication / collaboration between staff members IC - Communication while waiting PM - Provide sufficient information
 RW - Reduce wait times IC - Cleanliness IF - Facilities RN - Reduce noise IC - Car parking PA - Access to food / drink O - Other U - Unclear

GQ - Staff quality

82. What were the best things about your visit to the ED?



Answers

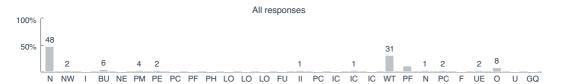
NB - Nothing N - None I - Incomprehensible E - Everything NW - Wait times EC - Emotional / interpersonal care

QO - Quality of medical treatment MO - Medical outcome PI - Patient involvement in care CP - Care / treatment provided by paramedics

GC - Communication between staff and patient GC - Communication between staff and family / friends / carers

GC - Communication / collaboration between staff members QO - Quality of information F - Facilities O - Other U - Unclear GQ - Staff quality

83. What were the worst things about your visit to the ED?



#### Answers

N - None NW - Nothing I - Incomprehensible BU - Being unwell / in hospital NE - Not enough staff PM - Medical treatment

PE - Emotional / interpersonal care PC - Care while waiting PF - Follow-up PH - Handwashing LO - Lack of patient involvement in care

LO - Lack of follow-up LO - Lack of privacy FU - Felt unsafe II - Insufficient information PC - Communication while waiting

IC - Communication between staff and patient family / friends / carers IC - Communication between staff and patient

IC - Communication / collaboration between staff members WT - Wait times PF - Facilities N - Noise PC - Car-parking F - Food

UE - Unclean ED O - Other U - Unclear GQ - Staff quality

## Overall Experience and Key Aspects of Care

The VHES paediatric Emergency Department questionnaire seeks to discover the experience of children under eight and their parents or carers at 36 Emergency Departments across Victoria. Potential respondents are randomly selected from children who visited the ED in the preceding month and were not admitted to hospital. From January 2015 the experience of children between eight and 15 years and their parents or carers have also been captured in an additional questionnaire.

This section features the overall experience question, and the five key aspects of care that were most likely to differentiate a positive overall experience from a negative overall experience for the paediatric emergency category.

In order to better understand the factors influencing patients' overall experiences in Victorian public hospitals, we asked a range of people to tell the story of their recent healthcare experiences. A video about the emergency experience can be viewed below.

## 0-7 8-15 62. Overall, how would you rate the care your child received while in the ED? View data



### Answers

VG - Very good G - Good A - Adequate P - Poor VP - Very poor



D14

S15

J16 M17

M14

50%

VIC

WES

MAJ

AR

AB

Health Service 39.92% (n=51) Peer group 40.44% (n=136)

Answers

50%

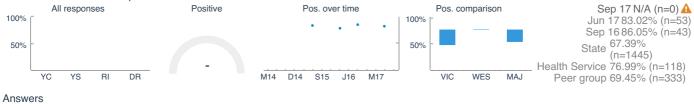
AR - About right AB - A bit too long MT - Much too long

М٦

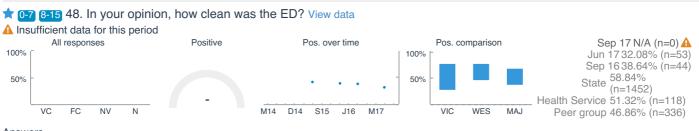
### ★ 0-7 8-15 38. While in the ED, did you receive sufficient information about your child's condition and

### treatment? View data

▲ Insufficient data for this period



### YC - Yes, completely YS - Yes, somewhat RI - Received insufficient info DR - Didn't receive info



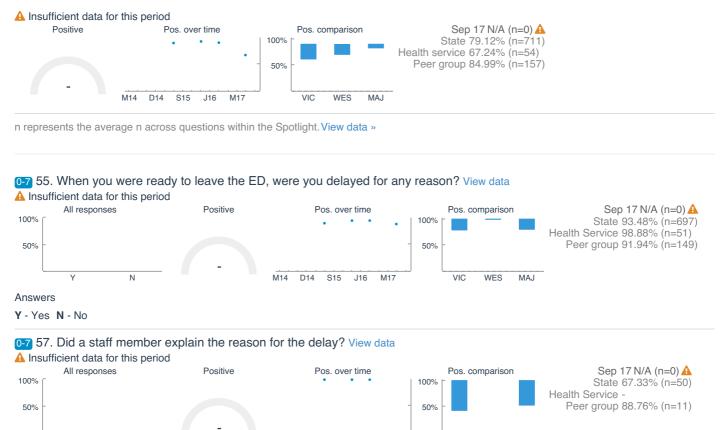
### Answers

VC - Very clean FC - Fairly clean NV - Not very clean N - Not at all clean

## Spotlight

## Transitions index paediatric emergency

The transitions index has been developed with the aim of improving the departure process from the emergency department. It incorporates the average of the positive scores for four paediatric emergency questions relating to leaving the emergency department. The index provides an overview of how hospitals, health services, peer groups and the state are performing in this process.



Answers

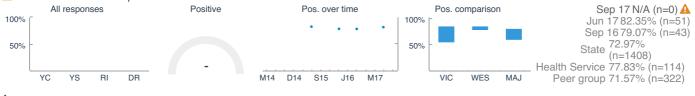
Y-Yes N-No

0-7 8-15 59. Before you left hospital, did the doctors and nurses give you sufficient information about managing your child's health and care at home? View data

M14 D14 S15

A Insufficient data for this period

N



J16 M17

VIC

WES

MAJ

Answers

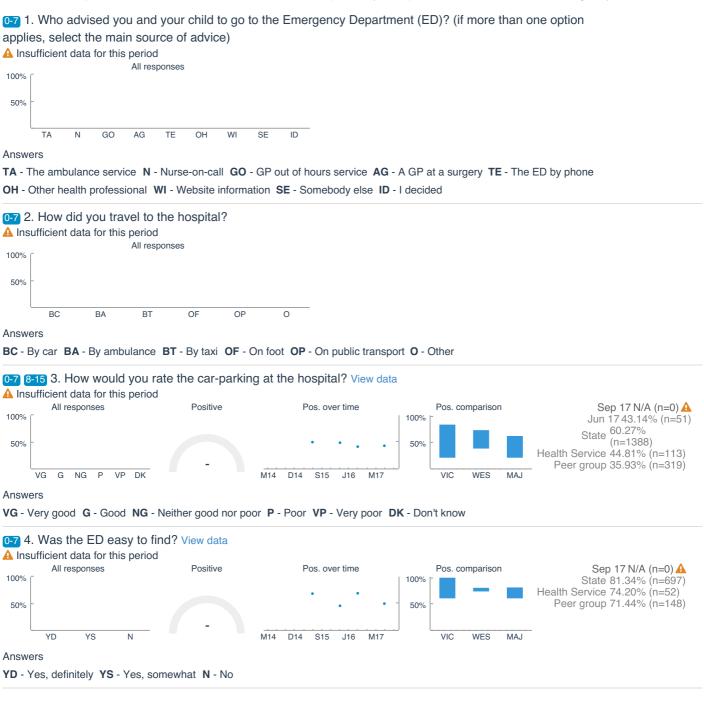
YC - Yes, completely YS - Yes, somewhat RI - Received insufficient info DR - Didn't receive info

**60.** If follow up with your child's General Practitioner (GP) was required, was he or she given all the necessary information about the treatment or advice that your child received in the ED? View data



## Arrival At The Emergency Department

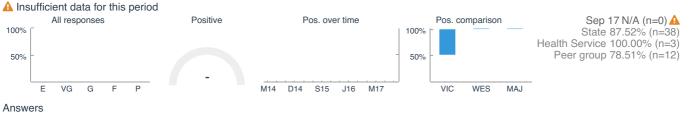
In this section, parents were asked whether their child's hospital stay was planned in advance or an emergency.



### Ambulance

In this section, those parents whose children arrived at the ED by ambulance were asked how well the ambulance service and ED staff worked together and how long they waited with the ambulance crew before being handed over to the ED staff. They were also asked what happened after they arrived at the ED.



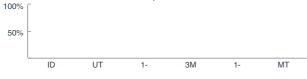


E - Excellent VG - Very good G - Good F - Fair P - Poor



A Insufficient data for this period

All responses



Answers

ID - I did not have to wait UT - Up to 15 minutes 1- - 16 - 30 minutes 3M - 30 minutes - 1 hour 1- - 1 - 2 hours MT - More than 2 hours

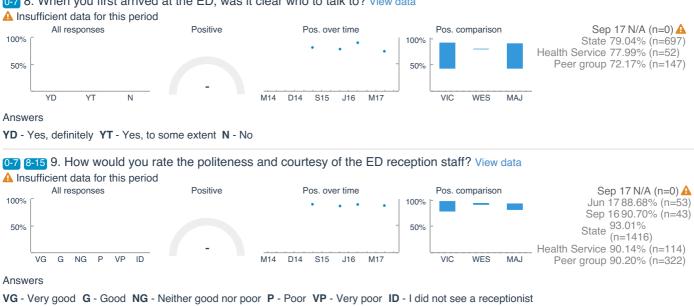


Answers

WW - We went to reception WI - Waited in waiting area WS - Waited somewhere else WT - Went to a cubicle or room

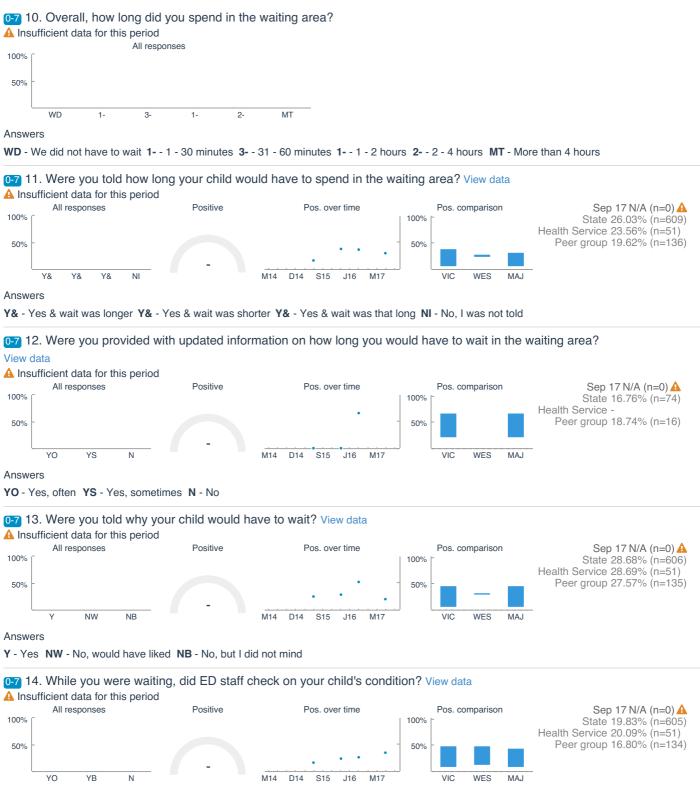
## Reception

In this section, parents were asked whether it was clear who to talk to when they first arrived at the emergency department. They were also asked to rate the politeness and courtesy of the ED reception staff.



## Waiting

This section covers parents? experience in the waiting area. It covers length of wait, communication and care while waiting, the cleanliness and comfort of the waiting room, and how long their child waited to be examined after being transferred to a cubical or room.

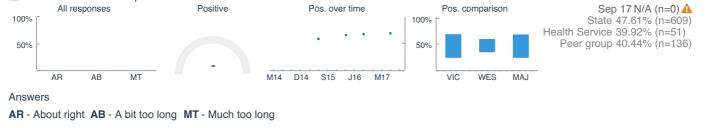


### Answers

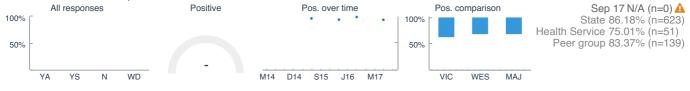
YO - Yes, often enough YB - Yes, but not enough N - No





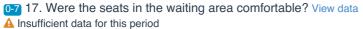






#### Answers





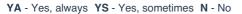


Answers

YD - Yes, definitely YT - Yes, to some extent N - No



Answers



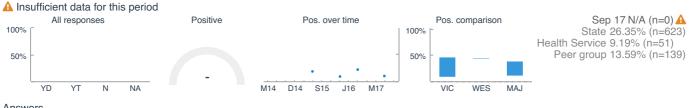


Answers

YL - Yes, lots to do SB - Some, but not enough NA - Not age / health appropriate N - No DN - Did not want / need this

## 0-7 20. Was your child looked after while you waited (with pain medicine, blankets, sick bowls or anything else

## that was needed)? View data

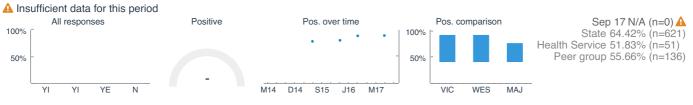


Answers

YD - Yes, definitely YT - Yes, to some extent N - No NA - Not applicable

0-7 21. At any point, did you feel worried that staff in the ED had forgotten about your child? (Please select all

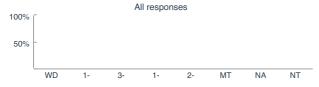
### that apply) View data



#### Answers

YI - Yes, in the waiting area YI - Yes, in a cubicle / room YE - Yes, elsewhere N - No

### 0-7 22. Once your child had been transferred to a cubicle or room, how long did he/she wait to be examined? ▲ Insufficient data for this period



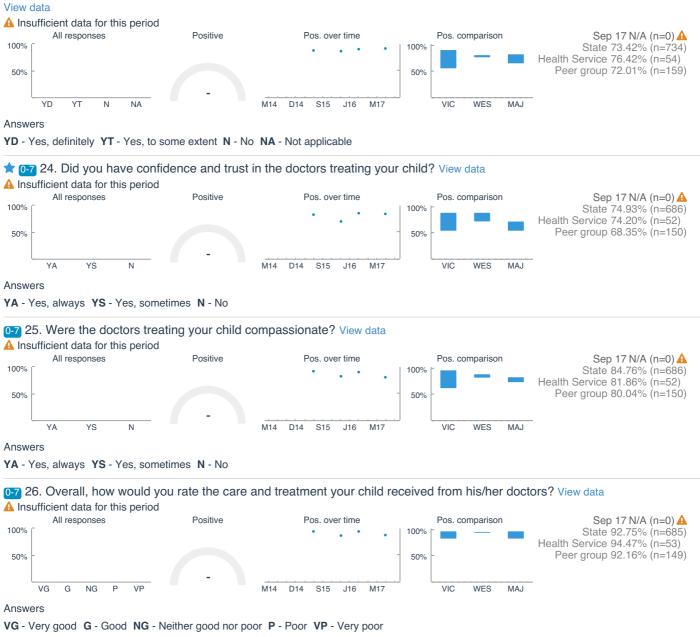
### Answers

WD - We did not have to wait 1- - 1 - 30 minutes 3- - 31 - 60 minutes 1- - 1 - 2 hours 2- - 2 - 4 hours MT - More than 4 hours NA - Not applicable NT - Never transferred

## Your Child's Doctors

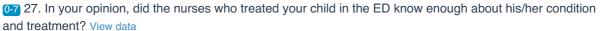
This section covers the care provided specifically by doctors. Patients were asked whether they had enough time to discuss their child?s health with a doctor in the ED, whether they had confidence and trust in the doctors treating their child, whether the doctors were compassionate, and to rate the care and treatment received from doctors overall.

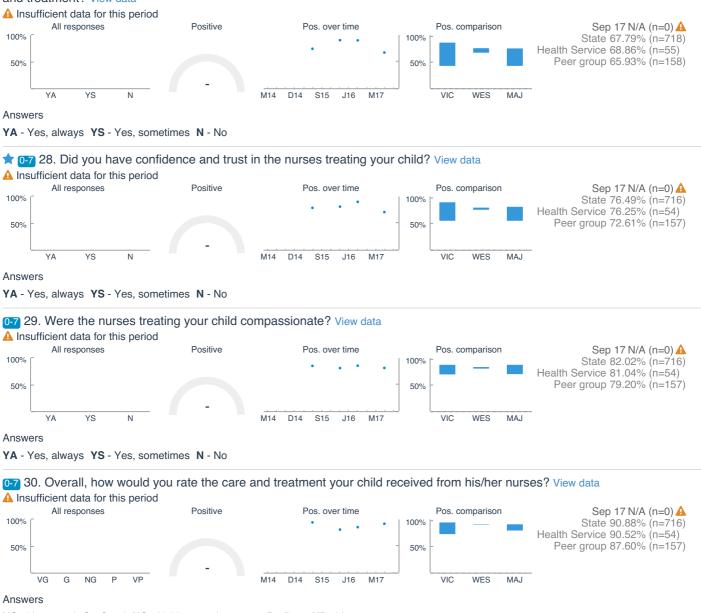
0-7 23. Did you have enough time to discuss your child's health or medical problem with a doctor in the ED?



## Your Child's Nurses

This section covers the care provided specifically by nurses. Parents were asked to rate the nurses? knowledge of their child?s condition and treatment, their confidence and trust in the nurses, whether or not the nurses were compassionate and the overall care and treatment received.



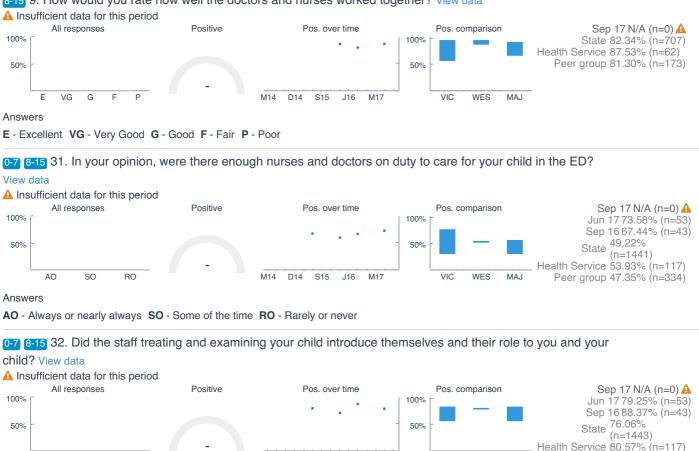


VG - Very good G - Good NG - Neither good nor poor P - Poor VP - Very poor

## Your Child's Care And Treatment

This section covers care provided by all health professionals to patients during their ED visit. Parents were asked whether there were enough doctors and nurses on duty to take care of their child in the ED and whether staff introduced themselves and explained things in a way they and their child could understand. Questions also covered hand washing, the consistency and sufficiency of information, the availability of staff, emotional support and pain management.





Answers

YA

YA - Yes, all staff SS - Some staff VF - Very few / none

0-7 8-15 33. How often did the doctors, nurses and other healthcare professionals caring for your child explain things in a way you could understand? View data

S15

M17

J16

VIC

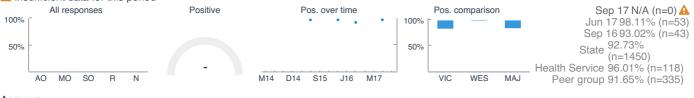
WES

MAJ

Peer group 73.68% (n=335)

M14 D14

A Insufficient data for this period



Answers

AO - All of the time MO - Most of the time SO - Some of the time R - Rarely N - Never

0-7 8-15 34. How often did doctors, nurses and other healthcare professionals explain things to your child in a way that was appropriate for him/her? View data

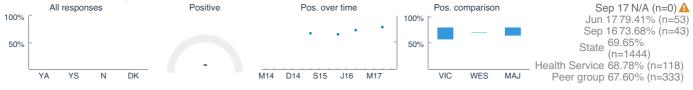


AO - All of the time MO - Most of the time SO - Some of the time R - Rarely N - Never

### 0-7 8-15 35. Did you see ED staff wash their hands, use hand gel to clean their hands, or put on clean gloves

#### before examining your child? View data

### A Insufficient data for this period

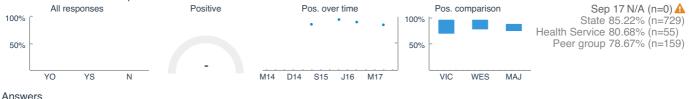


#### Answers



•7 36. Sometimes in a hospital, a member of staff will say one thing about your child's care and another will say something quite different. Did this happen to you? View data

A Insufficient data for this period



YO - Yes, often YS - Yes, sometimes N - No

**0-7** 37. Were you involved (as much as you wanted to be) in decisions about your child's care and treatment? View data

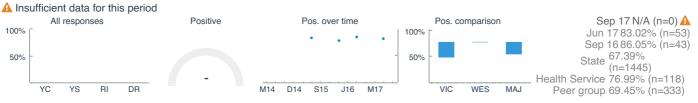


#### Answers

YD - Yes, definitely YT - Yes, to some extent N - No ID - I didn't want this

### ★ 0-7 8-15 38. While in the ED, did you receive sufficient information about your child's condition and

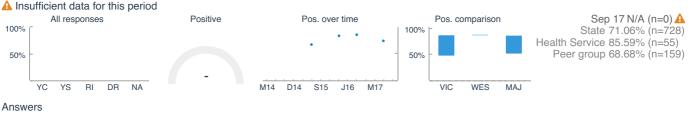
### treatment? View data



Answers

YC - Yes, completely YS - Yes, somewhat RI - Received insufficient info DR - Didn't receive info

**0-7** 39. Did you receive sufficient information about any medication your child was given while in the ED (e.g. purpose, side effects and how to administer the medication)? View data

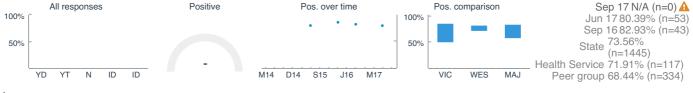


YC - Yes, completely YS - Yes, somewhat RI - Received insufficient info DR - Didn't receive info NA - Not applicable

#### 0-7 8-15 40. If you had any questions or worries about your child's condition or treatment did a health

professional discuss them with you? View data

#### ▲ Insufficient data for this period



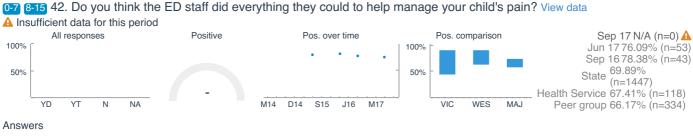
#### Answers

YD - Yes, definitely YT - Yes, to some extent N - No ID - I didn't raise them ID - I didn't have any

#### 0-7 8-15 41. If your child needed assistance, were you able to get a member of staff to help him/her within a reasonable time? View data A Insufficient data for this period Positive Sep 17 N/A (n=0) All responses Pos. over time Pos. comparison 100% 100% Jun 17 91.89% (n=53) Sep 16 96.15% (n=43) State 78.85% (n=1444) 50% 50% Health Service 80.32% (n=118) AO MO SO D14 WES R Ν NA M14 S15 J16 M17 VIC MAJ Peer group 77.53% (n=333)

Answers

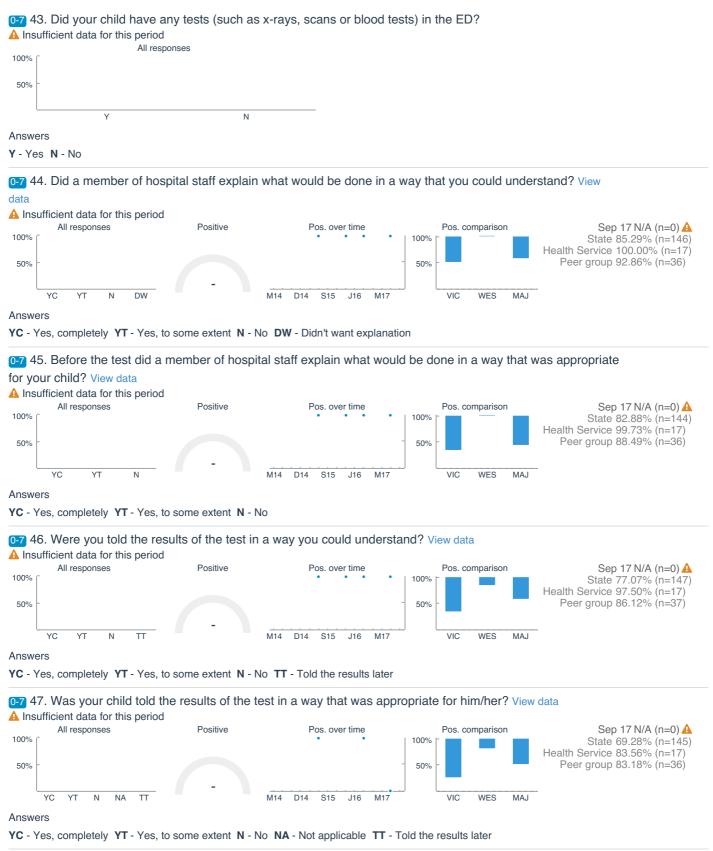
AO - All of the time MO - Most of the time SO - Some of the time R - Rarely N - Never NA - Not applicable



YD - Yes, definitely YT - Yes, to some extent N - No NA - Not applicable

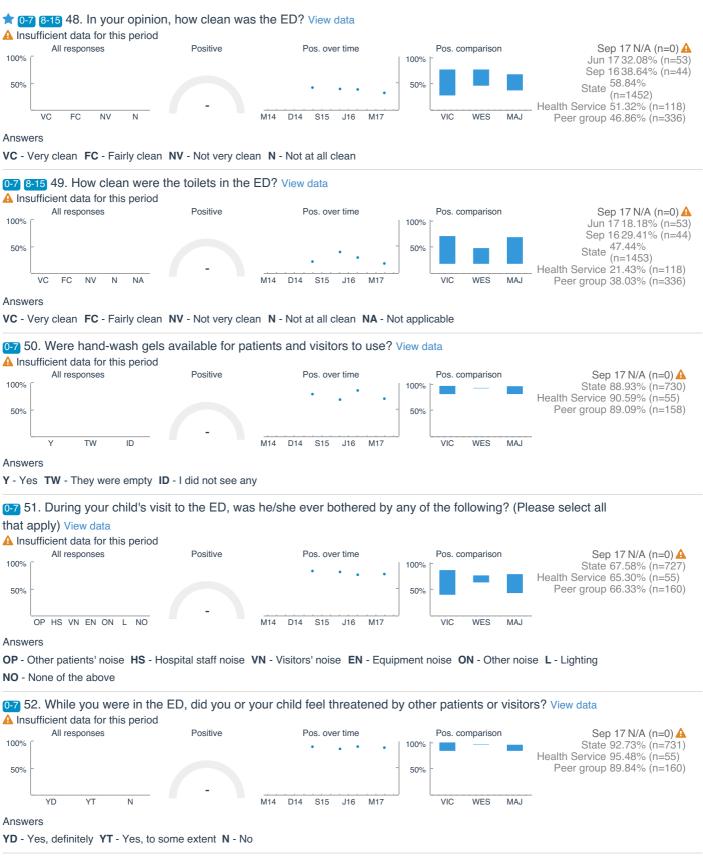
#### Tests

In this section, parents were asked whether their child had any tests while in the ED. Those whose child received tests were asked whether staff explained what the test would involve and the results in a manner that the parent and patient could understand.



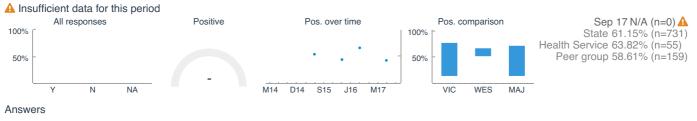
#### Hospital Environment And Facilities

This section explored the physical environment of the ED. Patients were asked about the cleanliness of the ED and toilets, hand washing, safety and access to food and drinks.



### 0-7 53. Were you and your child able to access suitable food and drinks when you were in the ED, if you

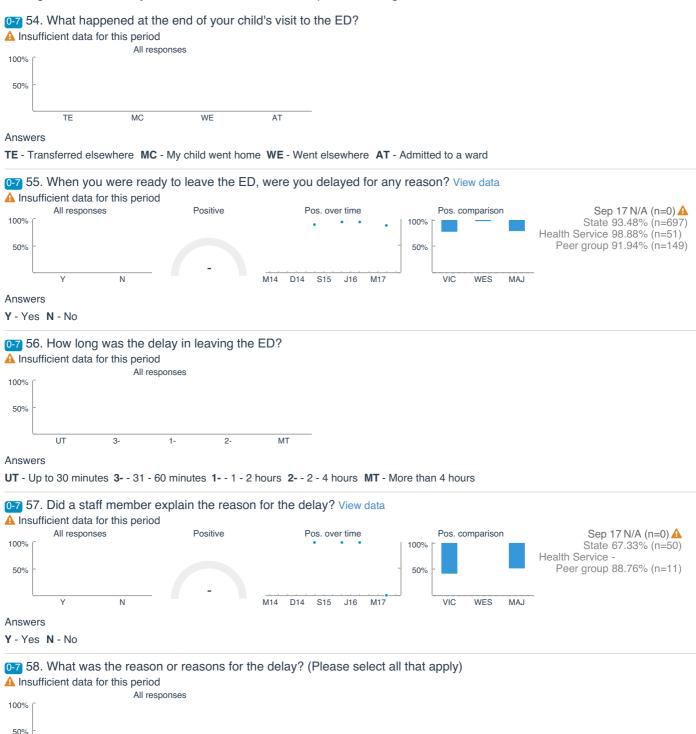
#### wanted to? View data





#### Leaving The Emergency Department

In this section, parents were asked what happened at the end of their child?s ED visit, the length and reason for any delays in leaving, and whether they received sufficient information prior to leaving.



Answers

AW

WT

AW

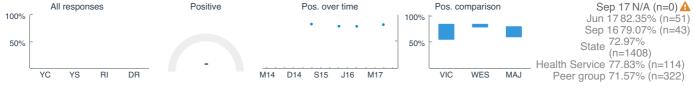
LF

AW - A wait for medicines WT - Wait to see the doctor AW - A wait for transport LF - Letter for GP SO - Some other reason

SO

**0-7 8-15** 59. Before you left hospital, did the doctors and nurses give you sufficient information about managing your child's health and care at home? View data

#### ▲ Insufficient data for this period



#### Answers

YC - Yes, completely YS - Yes, somewhat RI - Received insufficient info DR - Didn't receive info

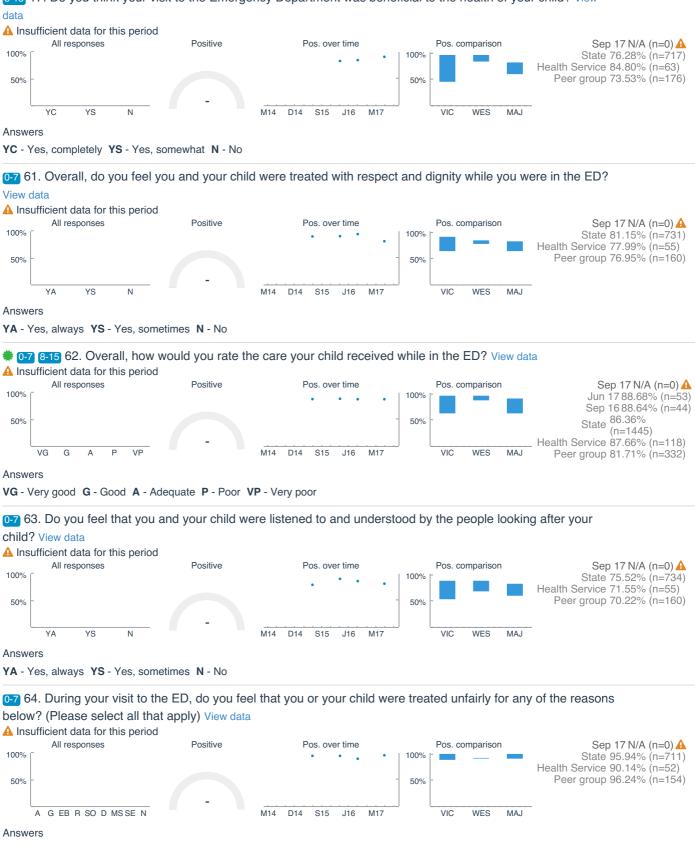
0-7 60. If follow up with your child's General Practitioner (GP) was required, was he or she given all the necessary information about the treatment or advice that your child received in the ED? View data A Insufficient data for this period All responses Positive Pos. over time Pos. comparison Sep 17 N/A (n=0) 🛕 100% 100% State 82.71% (n=688) Health Service 92.24% (n=51) Peer group 87.70% (n=147) 50% 50% Ν NA M14 D14 J16 M17 VIC WES MAJ S15 γ Answers

Y - Yes N - No NA - Not applicable

#### Overall

This section covers parents? overall feelings about their child?s experience, including whether they and their child were treated with respect and dignity and listened to and understood by hospital staff. Parents were also asked to rate the care they received overall, and whether they or their child were treated unfairly for any reason.

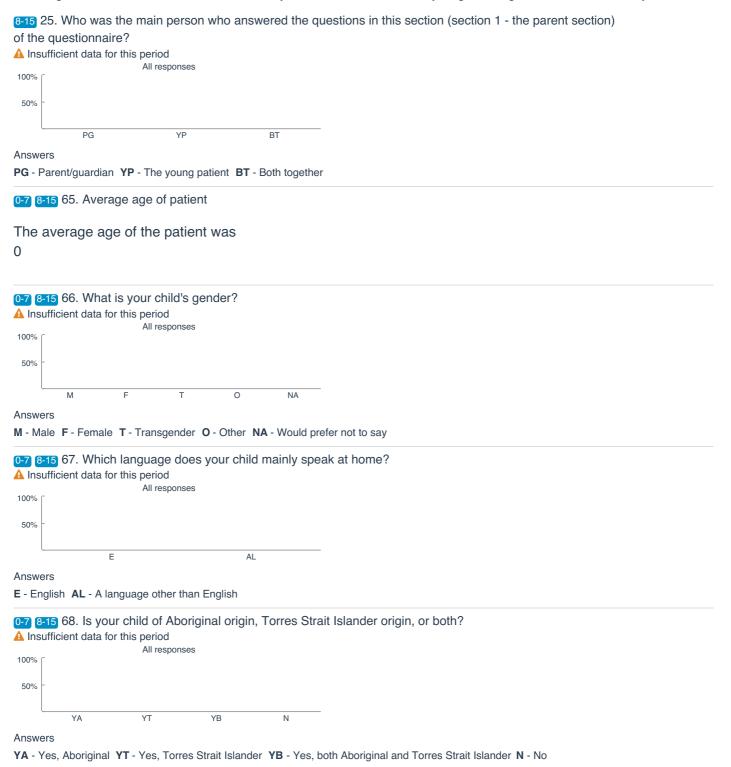
8-15 17. Do you think your visit to the Emergency Department was beneficial to the health of your child? View



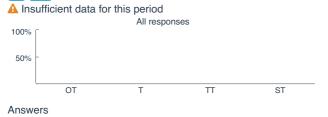
A - Age G - Gender EB - Ethnic background R - Religion SO - Sexual orientation D - Disability MS - Marital status SE - Something else N - No

#### About Your Child

This section covers general demographic questions about the patient. These included year of birth, gender, main language spoken and Aboriginal/Torres Strait Islander status. Parents were also asked a number of questions about their child?s health, including how often in the last twelve months they had visited the ED and any long standing medical conditions they have.



0-7 8-15 69. How many times in the last 12 months has your child been in the ED of this hospital?



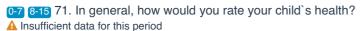
OT - One time only T - Twice TT - Three to five times ST - Six times or more

**0-7 8-15** 70. Which, if any, of the following long-standing conditions does your child have? (Please select all that apply)



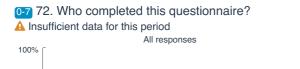
Answers

AC - A chronic illness AM - A mobility impairment DO - Deafness or hearing impairment BO - Blindness or vision impairment AM - A mental health condition AL - A learning disability NO - None of these





E - Excellent VG - Very good G - Good F - Fair P - Poor



Ρ



тс

50%

TC - The child P - Parent / carer PA - Patient and parent / carer SE - Someone else

PA

SE

#### The Child's Opinion: Arrival And Waiting

#### 8-15 26. Do you think the amount of time you spent in the waiting area was?? View data A Insufficient data for this period Positive All responses Pos over time Pos. comparison Sep 17 N/A (n=0) 100% 100% State 35.18% (n=711) Health Service 36.67% (n=62) Peer group 36.29% (n=174) 50% 50% AR BT МТ NA M14 D14 S15 J16 M17 VIC WES MAJ Answers AR - About right BT - A bit too long MT - Much too long NA - N/A 8-15 27. While you were waiting, did hospital staff tell you what was happening? View data A Insufficient data for this period All responses Positive Pos. over time Pos. comparison Sep 17 N/A (n=0) 100% 100% State 18.39% (n=637) Health Service 12.69% (n=57) Peer group 19.08% (n=153) 50% 50% YD YS NA NW DK M14 D14 S15 J16 M17 VIC WES MAJ Answers YD - Yes, definitely YS - Yes, sort of NA - This was not needed NW - No & I would like this DK - Don't know 8-15 28. Did the hospital provide enough for you to do when you were waiting to be seen (such as toys, games and books)? View data A Insufficient data for this period All responses Positive Pos. over time Sep 17 N/A (n=0) 🛕 Pos. comparison 100% 100% State 9.48% (n=623) Health Service 1.36% (n=57) Peer group 4.96% (n=149) 50% 50%

Answers

YL NF NF

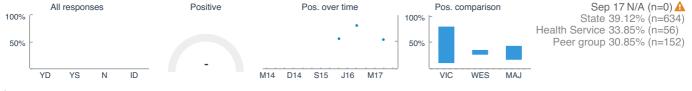
YL - Yes, lots to do NE - Not enough NF - Not for my age group N - No DK - Don't know IH - I had my own things IW - I was not well

8-15 29. Were you looked after while you waited in the Emergency Department (with pain medicine, blankets, sick bowls or anything else you needed)? View data

M14 D14 S15

A Insufficient data for this period

N DK IH IW



J16

M17

VIC

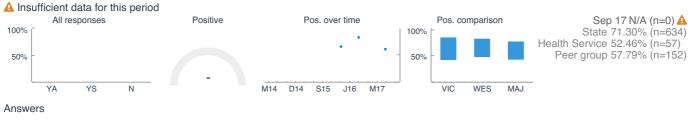
WES

MA.I

#### Answers

YD - Yes, definitely YS - Yes, sort of N - No ID - I did not need anything

8-15 30. While you were waiting in the Emergency Department, did you feel safe? View data

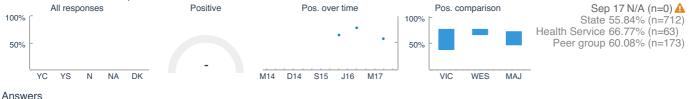


YA - Yes, always YS - Yes, sort of N - No

#### The Child's Opinion: Your Care

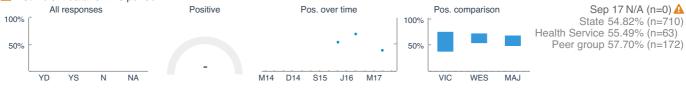
#### 8-15 31. Did hospital staff caring for you explain things in a way you could understand? View data





YC - Yes, completely YS - Yes, sort of N - No NA - N/A DK - Don't know

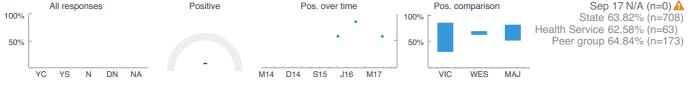
8-15 32. Were you involved as much as you wanted to be in decisions about your care and treatment? View data



#### Answers

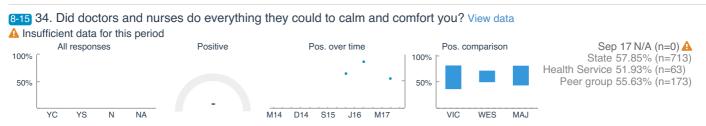
YD - Yes, definitely YS - Yes, sort of N - No NA - NA

8-15 33. If you had any questions or worries, did a doctor or nurse talk with you about them? View data
A Insufficient data for this period



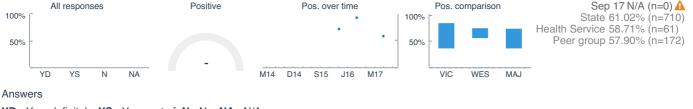
#### Answers

YC - Yes, completely YS - Yes, sort of N - No DN - Did not have questions NA - Didn't feel comfortable discussing

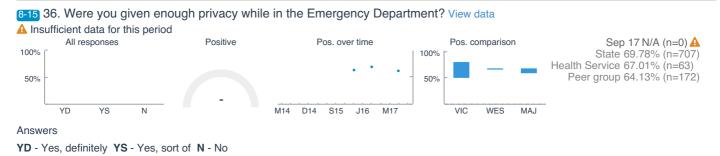


Answers

8-15 35. Did doctors and nurses do everything they could to help with your pain? View data
A Insufficient data for this period

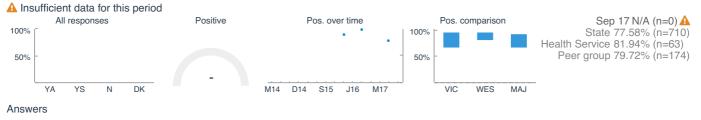






YC - Yes, completely YS - Yes, sort of N - No NA - This was not needed

8-15 37. Were you ever told different things by different people, which left you feeling confused? View data





#### The Child's Opinion: Overall

#### 8-15 41. Overall, how clean was the Emergency Department? View data



Answers

VC - Very clean FC - Fairly clean NV - Not very clean N - Not at all clean

#### 8-15 42. How clean were the toilets in the Emergency Department? View data



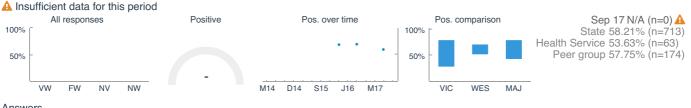


Answers

VC - Very clean FC - Fairly clean NV - Not very clean N - Not at all clean NA - N/A

#### 8-15 43. Overall, how well do you think you were looked after by staff during your visit to the Emergency

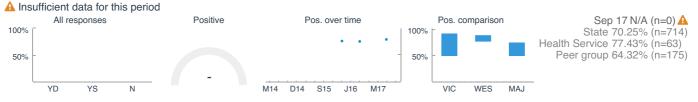
#### Department? View data



Answers

VW - Very well FW - Fairly well NV - Not very well NW - Not at all well

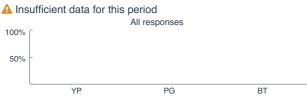
8-15 44. Do you think your visit to the Emergency Department helped you with your health problem? View data



Answers

YD - Yes, definitely YS - Yes, sort of N - No

**8-15** 45. Who was the main person who answered the questions in this section (section 2 - the child's section) of the questionnaire?

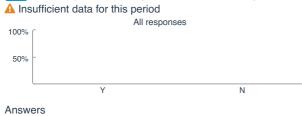


Answers

YP - The young patient PG - The parent/guardian BT - Both together

#### The Child's Opinion: Tests

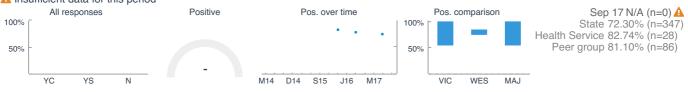
#### 8-15 38. Did you have any tests (such as x-rays, scans or blood tests) in the Emergency Department?



Y-Yes N-No

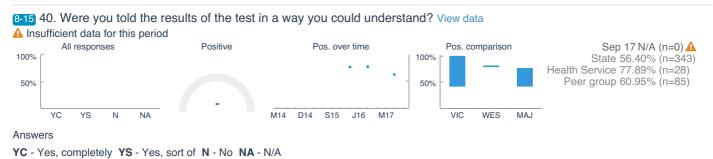
**8-15** 39. Before the test, did someone tell you what was going to happen in a way you could understand? View data

#### A Insufficient data for this period



Answers

YC - Yes, completely YS - Yes, sort of N - No



#### **Other Comments**

This section allowed the parents to suggest ways that they felt the hospital could improve their care and services and to list the best and worst things about their child's visit to the ED.

# **0-7 8-15** 73. What could the hospital do to improve the care and services it provides to better meet the needs of patients?

A Insufficient data for this period

All responses

Answers

NT - Nothing N - None I - Incomprehensible IN - Staff numbers IE - Emotional / interpersonal care of patient
IE - Emotional / interpersonal care of parents IM - Medical treatment IH - Handwashing IC - Care while waiting IF - Follow-up IP - Patient safety
IP - Privacy IC - Communication while waiting IC - Communication between staff and patient IC - Communication between staff and parents
IC - Communication / collaboration between staff members RW - Wait times PM - Sufficient information IC - Cleanliness IF - Facilities
IF - Facilities for parents RN - Reduce noise IC - Car parking PA - Access to food / drink IF - Facilities for parents
BE - Better / more entertainment / education for children O - Other U - Unclear GQ - Staff quality

**0-7 8-15** 74. What were the best things about your child's visit to the ED?

<u>a</u> 1115																							
100%	ſ									All r	espon	ses											
50%	-																						
	NB	N	I	Е	NW	EC	EC	QO	МО	PI	PI	CP	GC	GC	GC	QO	F-	FF	F/	0	U	GQ	

Answers

NB - Nothing N - None I - Incomprehensible E - Everything NW - Wait times EC - Emotional / interpersonal care of patient

EC - Emotional / interpersonal care of parents QO - Medical treatment MO - Medical outcome PI - Patient involvement in care
 PI - Parent involvement in care CP - Care / treatment provided by paramedics GC - Communication between staff and patient
 GC - Communication between staff and parents GC - Communication / collaboration between staff members QO - Quality of information
 F- - Facilities - general FF - Facilities for parents F/ - Facilities / entertainment / education for children O - Other U - Unclear GQ - Staff quality

**0-7 8-15** 75. What were the worst things about your child's visit to the ED? A Insufficient data for this period

														A	ll res	spon	ses																
100%	-																																
50%	-																																
	_																																
	Ν	NW	I	CB	NE	PM	PE	PE	PC	PF	PH	LO	LO	LO	LO	FU	Ш	PC	IC	IC	IC	WT	PF	Ν	PC	LO	UE	PF	LO	0	U	GQ	

Answers

N - None NW - Nothing I - Incomprehensible CB - Child Being unwell / in hospital NE - Not enough staff PM - Medical treatment
PE - Emotional / interpersonal care of patient PE - Emotional / interpersonal care of parents PC - Care while waiting PF - Follow-up
PH - Handwashing LO - Lack of patient involvement in care LO - Lack of parent / carer involvement in care LO - Lack of follow-up
LO - Lack of privacy FU - Felt unsafe II - Insufficient information PC - Communication while waiting
IC - communication between staff and parents IC - Communication between staff and patient
IC - Communication / collaboration between staff members WT - Wait times PF - Facilities N - Noise PC - Car-parking
LO - Lack of food / drinks UE - Unclean ED PF - Facilities for parents LO - Lack of entertainment / education for child O - Other U - Unclear

GQ - Staff quality

The VHES asks consumers to provide in-depth feedback about a specific healthcare experiences.

#### **Patient categories**

Currently, there are nine patient categories included in the VHES. Five of these are continuous surveys, sent monthly to a sample of eligible patients who had a hospital or emergency department experience in the previous month, and asking them to reflect on that specific experience, and four are annual surveys.

Continuous surveys are:

1. Adult inpatients aged 16 or over who were admitted to one of 116 hospitals.

2. Paediatric inpatients aged 15 or under who were admitted to one of 34 hospitals. For those aged under eight, the survey is directed to the parent or carer, while the 8-15 year-olds? questionnaire has questions for the parent or carer to complete, the child to complete and both to complete together.

3. Adult emergency patients aged 16 or over who attended one of 39 emergency departments but were not admitted to hospital.

4. Paediatric emergency patients aged 16 or under who attended one of 39 emergency departments but were not admitted to hospital, aged 15 or under who were admitted to one of 34 hospitals. For those aged under eight, the survey is directed to the parent or carer, while the 8-15 year-olds? questionnaire has questions for the parent or carer to complete, the child to complete and both to complete together.

5. Maternity consumers who received services from Victorian public hospital services in relation

to antenatal, labour and birth and postnatal care at one of 42 hospitals.

Annual surveys are:

1. Adult specialist clinics patients who had an outpatient appointment at one of 47 hospitals.

- 2. Paediatric specialist clinics patients who had an outpatient appointment at one of 10 hospitals.
- 3. Community health services who used one of 88 community health services.
- 4. Planned and emergency ambulance service users

Questionnaires can be viewed by clicking on the download symbol next to each patient category name in the results view.

#### Sampling and data collection

All patient categories use the same basic method of data collection, with the exception of community health which uses a different methodology designed to meet the unique needs of this population ? explained further below.

#### Data collection excluding community health

For all inpatient, emergency, maternity, specialist clinic and ambulance surveys, sample is provided monthly by each campus and by Ambulance Victoria (AV) from patient files. Campuses and AV are required to provide limited details (name, patient category, preferred language, date of birth, postal address and where possible, email address) for a defined number of randomly selected patients each month via a secure portal. These details are kept for six months to ensure that patients are not surveyed too frequently and then securely destroyed to preserve anonymity.

Patients for whom an email address is provided are then emailed a link to the online version of the questionnaire. If they do not complete the survey online within two business days, they are then posted a hard copy version of the questionnaire. Those patients for whom an email address is not provided are also posted a hard copy survey at this point. Patients who receive a survey in a language other than English will only have the option to complete this survey in hard copy. A questionnaire is sent to a patient in a language other than English if a patient's preferred language, as identified in the data provided by campuses, matches one of the languages available in the VHES.

Those who receive a mail-out survey are also given details to complete the survey online if they prefer, or to complete the hard copy version and return by reply paid envelope. All mail-out surveys are data entered, and the data is merged with online results. At this point, the unique patient IDs are checked to ensure no patients have attempted to complete online and hard copy versions of the survey.

#### **Data-collection - community health**

As noted above, a very different methodology is used for community health. Rather than surveys being mailed to the patient address, community health service clients are invited to participate, in person while using the service itself. This protects the anonymity of clients, addresses the absence of a consistent state-wide database of client details, and increases the opportunity for homeless or transitory clients and those with low-literacy to participate.

For each survey site, a unique survey pack is provided with the allocated number of English and other language surveys, based on estimates of monthly client appointments and language preferences provided by services.

Sites are instructed to offer the survey to each eligible client using the service (including taking services on home visits) until the survey allocation is depleted, or the fieldwork period ends.

Community service clients who agree to the survey have the opportunity to complete it in hard copy and mail by reply-paid envelope or online. In addition, community health services are encouraged to assist clients to complete the survey by providing-pads, computers and where possible, volunteer assistance within the service.

#### Languages

Adult Inpatient, Adult Emergency and Adult Specialist surveys are offered in the following 15 languages, in addition to English:

Arabic Croatian Greek Hindi Italian Macedonian Maltese Polish Russian Serbian Simplified Chinese Spanish **Traditional Chinese** Turkish Vietnamese Paediatric Inpatient, Paediatric Emergency, Maternity and Specialist Paediatric surveys are offered in the following 6 languages, in addition to English: Arabic Hindi Simplified Chinese Turkish **Traditional Chinese** Vietnamese Community health surveys are offered in the following 15 languages, in addition to English: Arabic **Burmese** Chin Hakha (from Burma, India, Bangladesh)

Dari

Farsi Greek Italian Karen Russian Simplified Chinese Somali Tamil Traditional Chinese Turkish

These languages were selected based on the top languages spoken by patients in Victoria's public health systems. In 2017, the ambulance survey was provided in English only, as limited information on the preferred language of patients was available.

#### Weighting and significance testing all patient categories

To ensure that data accurately represents the population of interest (the true population of patients at each campus), ? normalising factors? are applied to the data. Normalising factors are calculated based on the difference between the proportion of a certain type of respondent in the sample and the proportion of that type of respondent attending the health service. In essence, applying normalising factors to a dataset readjusts the achieved sample to resemble the population, removing any skew in the results. The calculation of proportional factors to normalise survey data is a standard research process.

**For adult inpatient, emergency and specialist clinics categories**, a proportional weighting scheme is applied to the sample at each campus to bring it into line with each campus?s true population by age and gender. This is based the average annual separation data for each campus in 2013 and applies to all adult inpatient, emergency and specialist clinics results. This means, for example, that older people aren't over-represented in the survey results by virtue of older people being more likely to complete the survey than younger people. No age or gender weighting is applied to paediatric, maternity or community health results.

When looking at results that reflect a group of campuses (for example, at health service, stateor peer group level) each campus is normalised according to what percentage of the group's true population it represents. This means, for example, that one hospital isn't underrepresented because its patients wereless likely to complete the survey than those at another hospital. Thislevel of normalisation occurs for **all patient categories**.

While weighting is applied to make a sample more accurate, any data manipulation can introduce error. Ipsos accounts for this by using an effective error margin ? a process that estimates the degree of error introduced into a sample by a weighting scheme and accounts for it in all statistical tests applied.

#### Reporting

Results for the inpatient, maternity and emergency surveys are reported on a quarterly basis on this reporting portal, three months following the completion of each quarter. Specialist clinics surveys are reported once annually in September/October based on data collected among April-June patients and community health service results are reported in March/April based on data collected in October-December.

#### Quarters are:

January to March stays (referred to as M in charts throughout the portal) - results made available in the middle of the following June

April to June stays (referred to as J in charts throughout the portal) - results made available in the middle of the following September

July to September stays (referred to as S in charts throughout the portal) - results made available in the middle of the following December

October to December stays (referred to as D in charts throughout the portal) - results made available in the middle of the following March.

For all categories excluding community health, results for each campus or health service are published on the portal only if the campus achieves at least 42 survey returns to ensure the data is statistically robust. However, these campuses will still contribute to the peer group, health service and state average. Where a campus does not achieve 42 survey returns, the portal will state that there is insufficient data for this period.

However, for **continuous surveys campuses** with only small numbers of completed questionnaires will receive a rolling sample as the survey progresses. This means that results for multiple quarters will be merged to provide a sufficient sample size over a longer period.

Note that a sample size of 42 affords a maximum margin of error of +/- 15% at the 95% level of confidence. This means that if 70% of patients at campus with 42 survey completes rate their overall experience as ?very good? or ?good?, we can be 95% confident that between 55% and 85% of all patients actually feel this way. As the sample size increases, the margin of error decreases. For example, if 70% of a sample of 150 patients rate their experience as'very good' or 'good, we can be 95% confident that between 78% and 62% actually feel this way, as the maximum margin of error is +/- 8%.

Provided a campus or health service (or district or region in the case of ambulance surveys) receives at least 42 survey returns overall, all individual questions will be presented, regardless of how many people answered that question. Some questions (such as those directed at people who need help understanding English) are asked only of a small subsection.

**Community health services and sites** are often much smaller than hospitals. As such, they are published on the portal only if the campus achieves at least 30 survey returns to ensure the data is statistically robust. However, these campuses will still contribute to the peer group, health service and state average. Where a campus does not achieve 30 survey returns, the portal will state that there is insufficient data for this period.

Note that a sample size of 30 affords a maximum margin of error of +/- 18% at the 95% level of confidence. This means that if 70% of patients at campus with 30 survey completes rate their overall experience as ?very good? or ?good?, we can be 95% confident that between 52% and 88% of all patients actually feel this way.

Provided community health site or health service (or district or region in the case of ambulance surveys) receives at least 30 survey returns overall, all individual questions will be presented, regardless of how many people answered that question. Some questions (such as those directed at people who need help understanding English) are asked only of a small subsection.

#### Analysis

Throughout this portal, statistically relevant significant findings have been reported at the 95% confidence interval and are represented within tables in green where the subject (campus, health service or state) has performed significantly higher than the comparator or in orange where it has performed significantly lower.

In addition, a key driver analysis was run to determine the Key Aspects of Care for each patient category. These Key Aspects of Care are the defining hospital experiences: those that are most likely to separate a patient who rated their overall experience as very good, from those who rate it as something else (good, adequate, poor, very poor).

Specifically, two methods were used to identify which parts of the patients' visit or stay in hospital are linked to a very good overall experiences:

1. The primary method was a binary logistic regression where the dependent variable (DV) is: Overall how would you rate the care you received while in hospital? The DV was categorised as 1= very good and 0 = all other modalities. The independent variables were all categorised so as to provide results as changes in odd ratios. For example, patients who always had confidence and trust in nurses are 8 times more likely to have had a very good experience overall than patients who had no confidence in nurses. The binary regression was used in forward stepwise model, using the conditional' rule to include variables. The results of the analysis were evaluated on the basis of change in the log-likelihood (LL) goodness of fit criterion as each additional variable was included stepwise. The results were also evaluated on the basis of the p values for the WALD test applied to the coefficient (effect size) of each categorised variable.

2. The secondary method used to confirm the results of the binary logit analysis is a machine learning algorithm: A classification and regression tree was used to identify variables which best account for the variation in the overall rating of patients' stay in hospital. CRT also provides a rank for all variables (whether apparent in tree or not). The relative importance of the variables linked to the target variable was examined for consistency with the binary logit analysis. Note: for technical reasons (i.e. not losing cases because of streaming in the questionnaire), some modalities were added to the list of modalities of some questions. Those modalities are then used as the base of the odds even though they may not be relevant to the question (e.g. base of odds is 'patient did not see Dr' when the question evaluates confidence in treating Dr). However, the odds were evaluated on the effect size vs a meaningful base (e.g. I received assistance all of the time is evaluated as an odd ratio vs I never received assistance, rather than I did not need assistance).

#### **Response rates**

In the July - Sept 2017 period, the following statewide response rates were achieved for each patient category:

- Adult Inpatient: 6452 individuals, or 29% of those invited completed the survey
- Adult Emergency: 2489 individuals, or 19% of those invited completed the survey
- Paediatric Inpatient: 1236 individuals, or 19% of those invited completed the survey
- Paediatric Emergency: 1461 individuals, or 14% of those invited completed the survey
- Maternity: 1355 individuals, or 27% of those invited completed the survey
- Paediatric Specialist Clinics: No surveying was conducted during the July Sept 2017 period
- Adult Specialist Clinics: No surveying was conducted during the July Sept 2017 period
- Community Health: No surveying was conducted during the July Sept 2017 period
- Ambulance Planned: No surveying was conducted during the July Sept 2017 period
- Ambulance Emergency: No surveying was conducted during the July Sept 2017 period

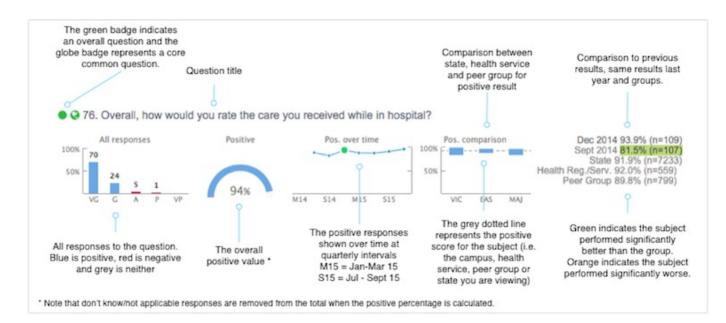
# Help

Answers to frequently asked questions are presented below. If these do not respond to your query, please contact us at results@vhes.com.au

### Frequently asked questions

#### Q: How do I interpret each question chart?

A: The images below provide detailed information on how to interpret and navigate charts and data.



#### Q: How frequently are results provided?

A: Results for the survey are reported on a quarterly basis, three months following the completion of each quarter. Quarters are:

- January to March stays (referred to as M in charts throughout the portal)results made available at the beginning of the following June
- April to June stays(referred to as J in charts throughout the portal)results made available at the beginning of the following September
- July to September stays(referred to as S in charts throughout the portal)results made available at the beginning of the following December
- October to December stays(referred to as D in charts throughout the portal)results made available at the beginning of the following March.

#### Q: Why can't I see results for certain patient categories for my campus?

A: Results for each campus are provided only if the campus achieves at least 42 survey returns to ensure the data is statistically robust (please see the Method section in Appendix 2 for more information on this). Where a campus does not achieve 42 survey returns, the portal will state that there is insufficient data for this period. Many health services experienced initial difficulties with data extraction and uploading. Most services have resolved these difficulties with and should expect results for all categories for the July- September results.

However, campuses with only small numbers of completed questionnaires will have the opportunity to receive a rolling sample as the survey progresses. This means that results for multiple quarters will be merged to provide a sufficient sample size over a longer period.

#### Q: What does the alert symbol A mean?

A: An alert symbol is shown where the sample size for a particular question is less than 30. This means that the margin of error for this question is quite large (more than +/- 18%), so results should be interpreted with caution.

#### Q: How can I see the patient comments?

A: Patient comments are analysed and presented at an aggregate level under the 'other comments' tab for each patient category. These comments are also provided, verbatim, to campuses.



The Victorian Healthcare Experience Survey operates under the Information Privacy Act 2000 (Vic) (IPA). The IPA requires Victorian State and local government agencies to collect and handle personal information in accordance with ten enforceable privacy principles.

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