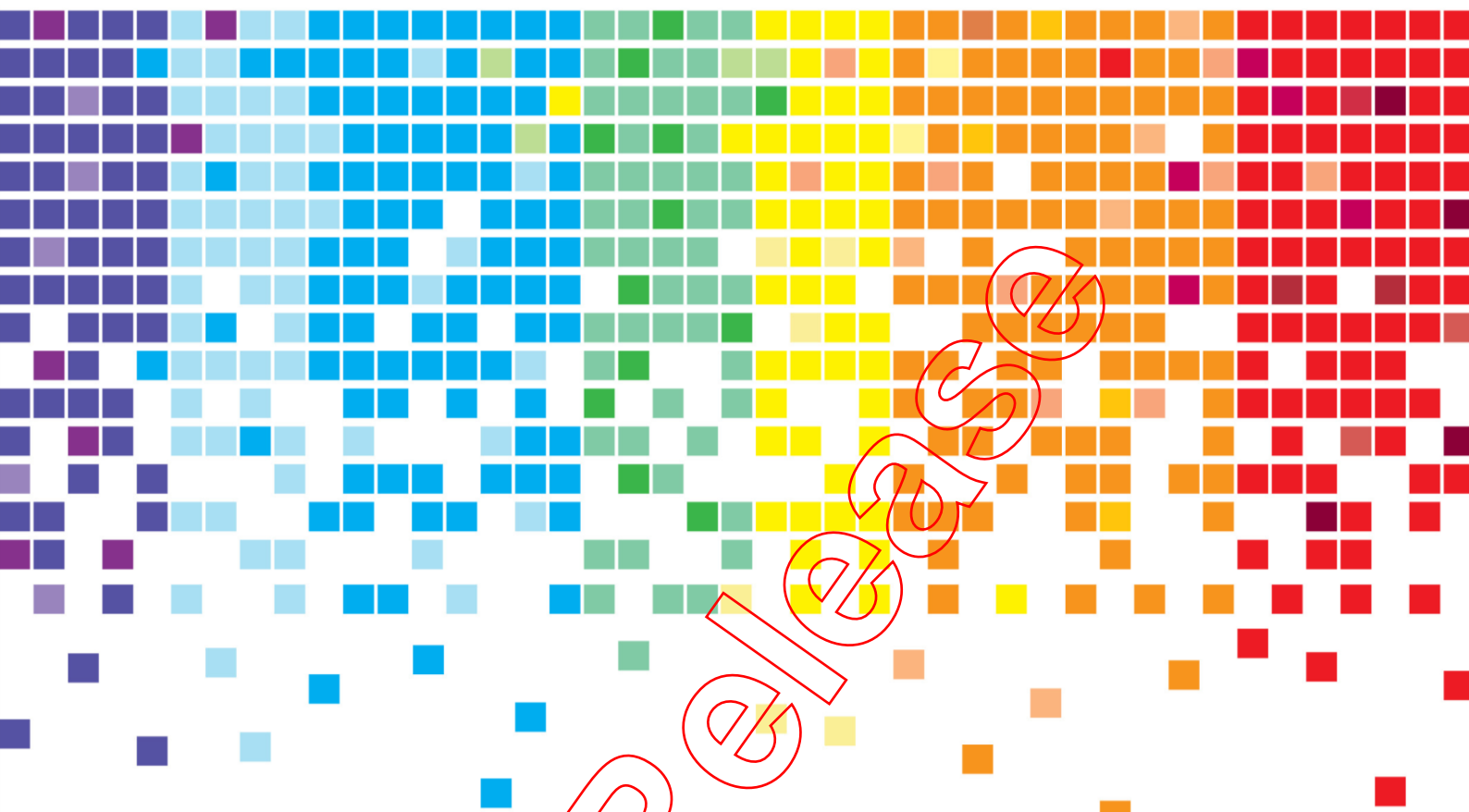


Patient Safety Unit



RTI RELEASES

Queensland Health Emergency Department Patient Experience Survey 2013

Queensland
May and June 2013

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22 November 2013
Final Version A

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1 Executive summary

1.1 Survey details, sample size and response rate

The Emergency Department Patient Experience Survey 2013 was conducted by the Government Statistician's office on behalf of Queensland Health. The survey was conducted using computer assisted telephone interviewing in August and September 2013. This is the second time this survey has been run in Queensland, the previous time being in 2011.

A total of 10,626 interviews were completed of patients who visited the Emergency Department of Queensland public hospitals in May and June 2013. The overall response rate for the survey was 60%.

The 35 largest public hospitals in Queensland utilising the Emergency Department Information System were included in the survey, 30 of which were also included in the 2011 survey. Hospitals have been grouped into four 'peer groups' that provide similar services to allow for valid comparisons between hospitals within each peer group (see Appendix B). The results of this survey will be used in monitoring and evaluating the quality of health services provided and to assist in quality improvement activity planning at the hospital and statewide levels. The results from this survey will be compared to the results from the previous survey where possible.

1.2 Headline survey results

1.2.1 Overall satisfaction

Seventy-four per cent of Emergency Department patients in Queensland Hospitals rated the care they received in the Emergency Department as 'Excellent' or 'Very good', and 23% rated it as 'Good' or 'Fair'.

This is less favourable than in 2011 (77% 'Excellent' or 'Very good' and 19% 'Good' or 'Fair').

1.2.2 Most favourable and unfavourable patient experience

The following areas received the highest proportions of favourable ratings and the highest proportions of unfavourable ratings from Emergency Department patients in Queensland. See Appendix C for the favourable/unfavourable classification of responses.

Areas of most favourable patient experience

- 98% rated the cleanliness of the Emergency Department as 'Very clean' or 'Fairly clean'
- 94% had all or some of the staff introduce themselves
- 93% rated the cleanliness of toilets as 'Very clean' or 'Fairly clean'
- 93% were not bothered or threatened by other patients/visitors
- 90% had confidence and trust in all or most of the doctors and nurses.

Areas of most unfavourable patient experience

- 85% did not see or receive information in the Emergency Department about how to give feedback about the care they received
- 78% were not told the expected wait time to be examined

- 72% were not told why they had to wait
- 61% were not given written information about their condition/treatment
- 50% were not told, were only told to some extent, or did not need information, about side effects of new medications.

1.2.3 Patient experience compared with 2011

Queensland public hospital Emergency Department results from the 2013 survey were compared with the 2011 survey results. The areas that had statistically significantly more favourable and less favourable results than in 2011 are listed below. See Appendix C for the favourable/unfavourable classification of responses.

Areas of improved performance

- Patient recall of triage process (70% vs 67%)
- Told expected wait time to be examined (22% vs 15%)
- Not ever worried about being forgotten (86% vs 84%)
- Sufficient information about condition or treatment provided (83% vs 81%)
- Sufficient privacy during examination or treatment (89% vs 86%)
- Assistance from staff when needed (73% vs 69%)
- All or some staff introduced themselves (94% vs 92%)
- Not bothered or threatened by patients/visitors (93% vs 91%)
- Given written/printed information about condition or treatment (39% vs 35%)
- Adequately advised when to resume usual activities (62% vs 58%)
- Danger signs of illness/treatment adequately explained (63% vs 57%).

Areas of reduced performance

- Rating of care received (overall satisfaction) (74% vs 77%)
- Everything possible done to control pain (75% vs 78%).

2 Introduction

The Emergency Department Patient Experience Survey 2013 was conducted by the Government Statistician's office on behalf of Queensland Health. The survey was conducted using computer assisted telephone interviewing from July to September 2013.

This is the second time this survey has been run in Queensland, the previous time being in 2011. Of the 35 hospitals that participated in the 2013 survey, 30 were also included in the 2011 survey. See Appendix B for the hospitals that participated in 2011.

For each participating hospital, a random group of eligible patients who had attended the Emergency Department during May or June 2013 was selected. For children's hospitals, parents or guardians of children were interviewed on their child's behalf. For more details on sampling and eligibility criteria, see Appendix A.

This report presents the findings from the 2013 survey of Emergency Department patients. Significance testing was performed to test for differences between 2013 and 2011 and all differences noted in this report are significant at the 5% level ($p < 0.05$).

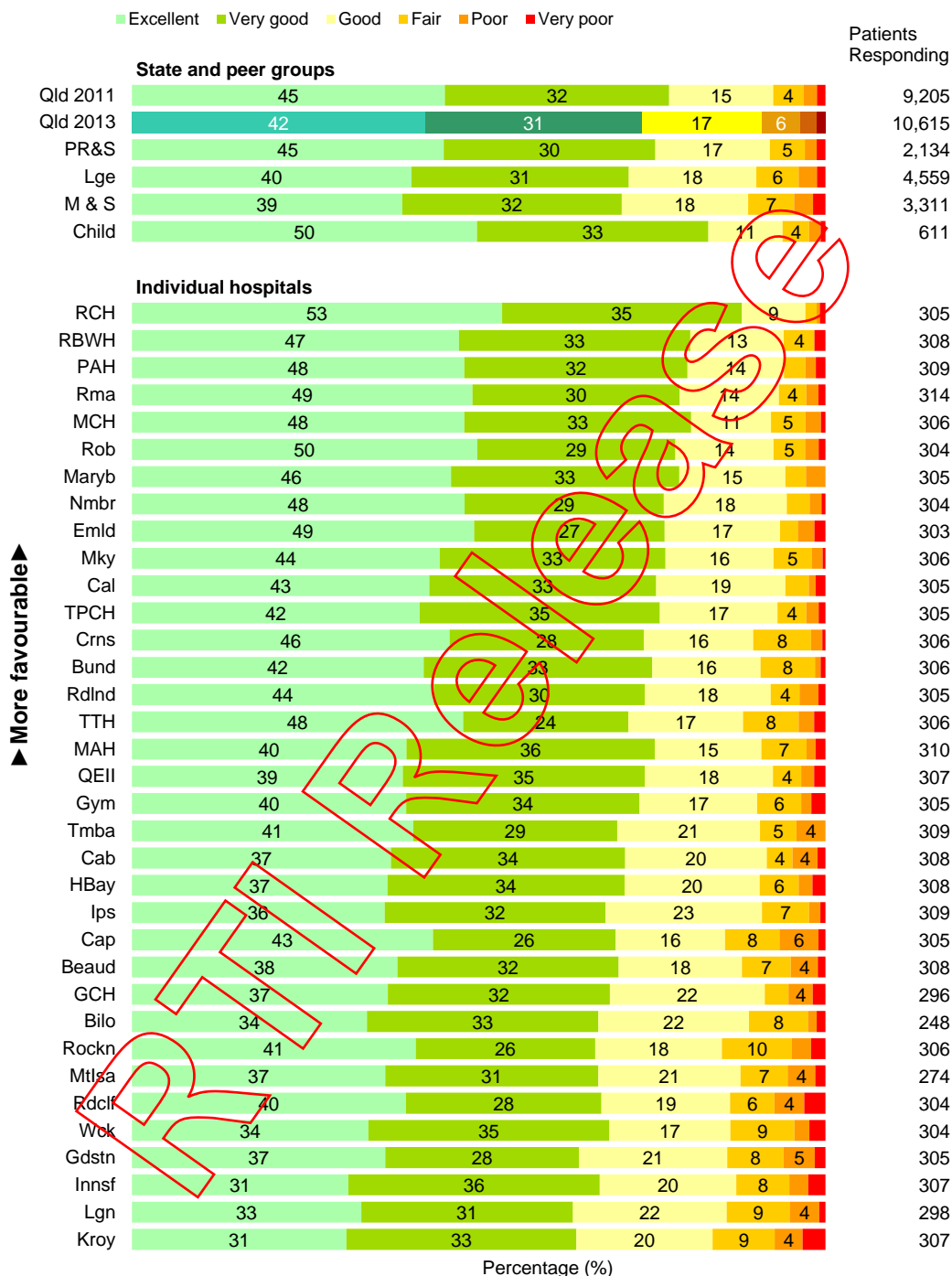
Values are displayed on the graphs in Sections 3 to 16 where space allows and are rounded to whole numbers. Due to these factors, the sum of responses displayed may not always equal 100%.

Only the relevant categories have been included in calculating the percentages used for each graph, with responses such as 'Didn't need' and 'Don't know' generally not included. Please refer to Appendix C for more information on the response categories included and excluded from each graph.

More information on the methodology is included in Appendix A.

3 Overall satisfaction

Overall satisfaction was measured with the single question: *Overall, how would you rate the care (you / your child) received in the Emergency Department ('Excellent'; 'Very good'; 'Good'; 'Fair'; 'Poor'; or 'Very poor')?*



The results for Queensland were significantly less favourable in **2013** than in **2011**.

4 Arrival at Emergency Department

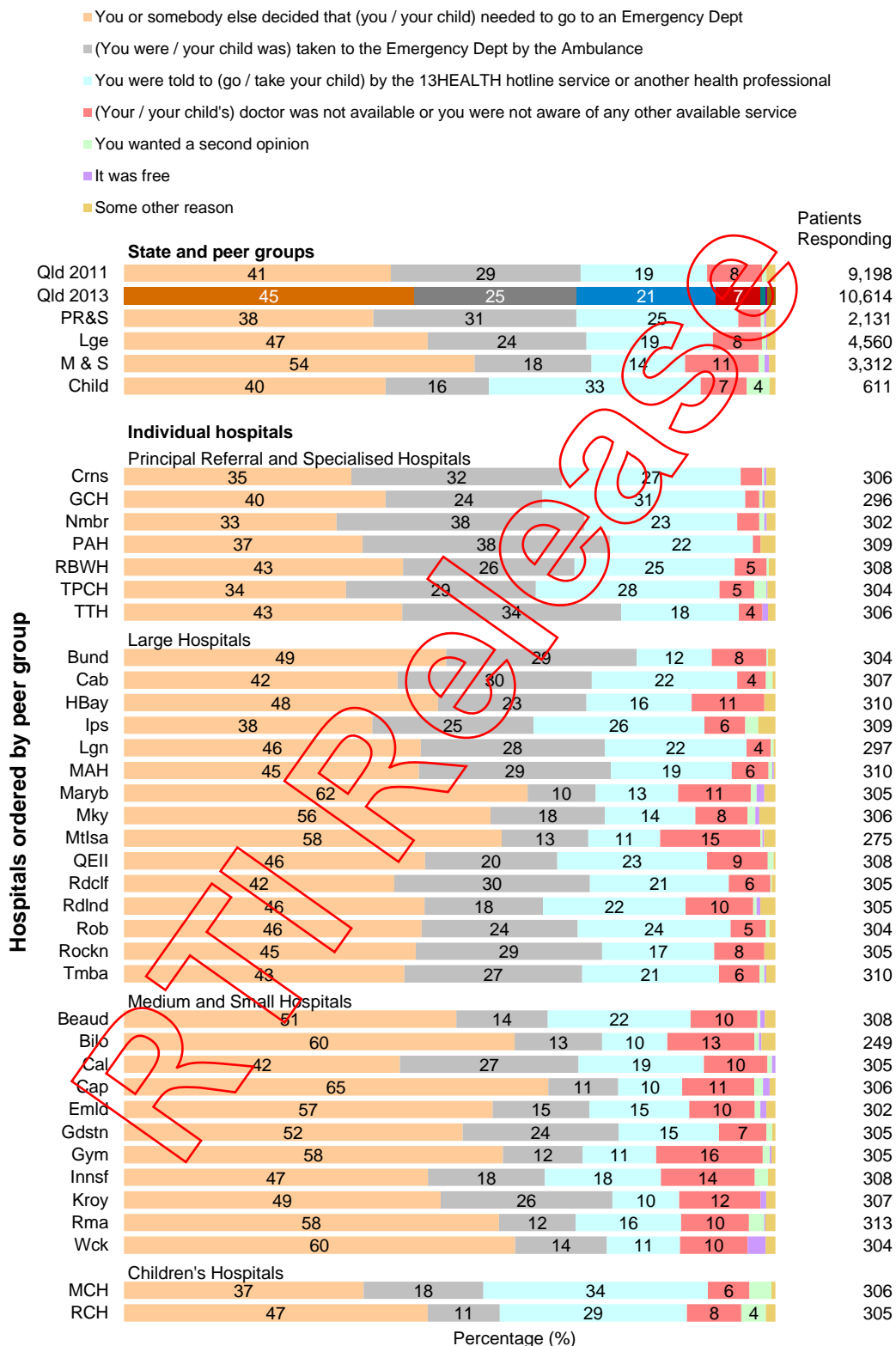
Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, were asked the following questions:

1. What was the MAIN reason that you (went / took your child) to the Emergency Department?
2. Do you remember taking part in the triage process?
3. Were you given enough privacy when discussing (your / your child's) condition with the triage nurse?
4. How would you rate the courtesy of the Emergency Department receptionist?

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4.1 Main reason for attending Emergency Department

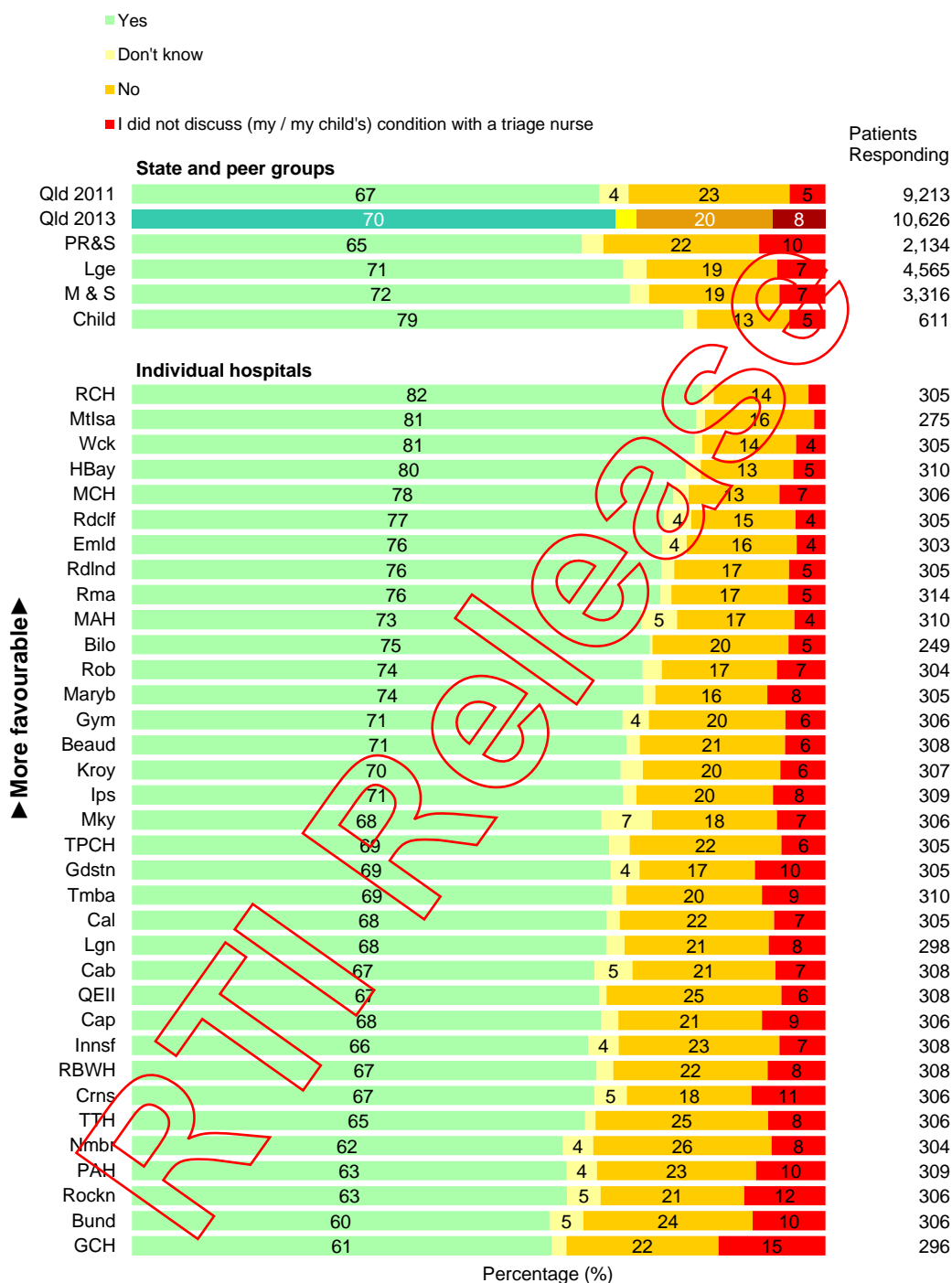
All patients or parents/guardians of patients were asked: *What was the MAIN reason that you (went / took your child) to the Emergency Department?*¹



¹ Note that the category "It was free" was added in 2013.

4.2 Patient recall of triage process

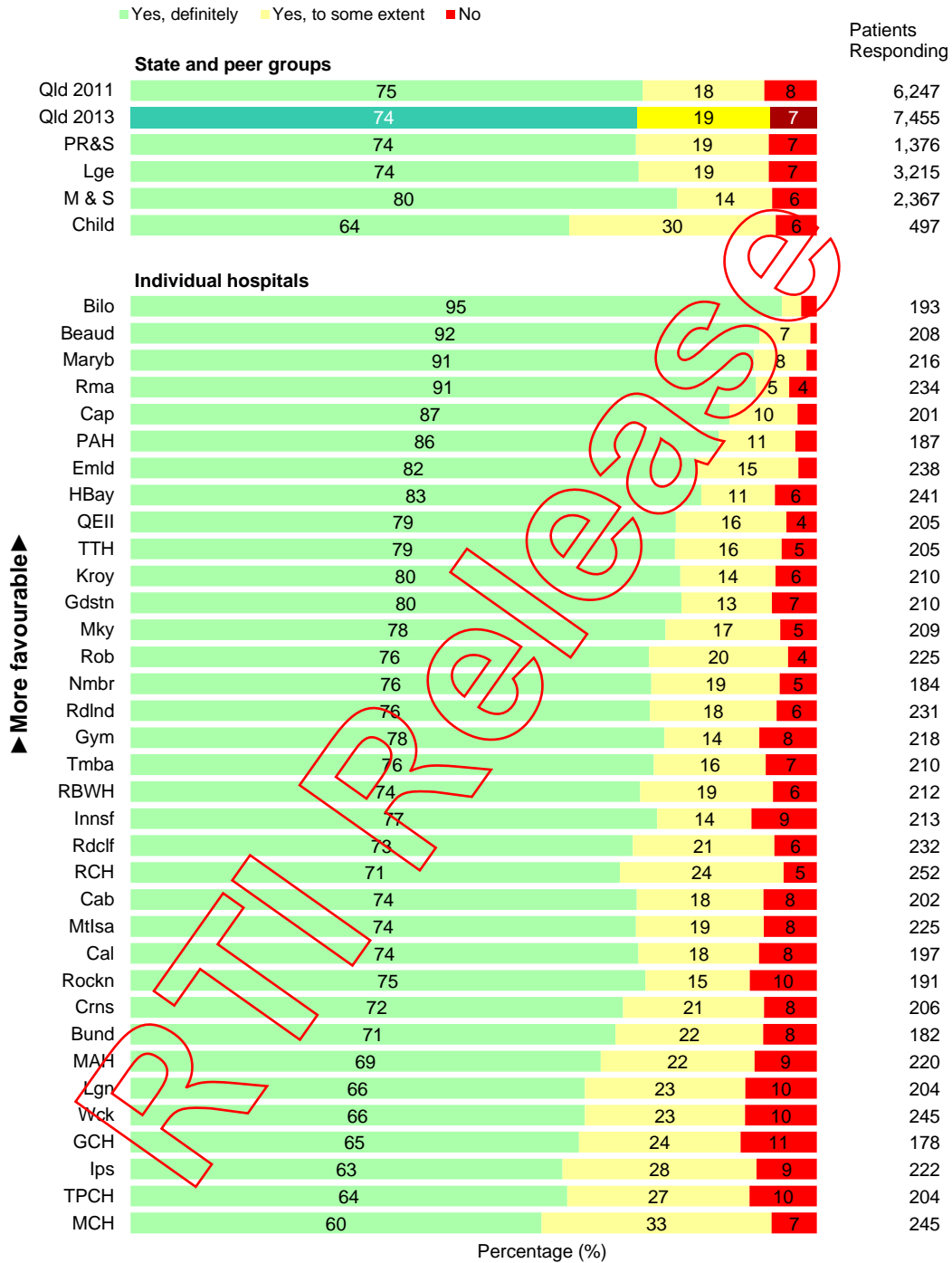
All patients or parents/guardians of patients were asked: *Do you remember taking part in the triage process?*



The results for Queensland were significantly more favourable in **2013** than in **2011**.

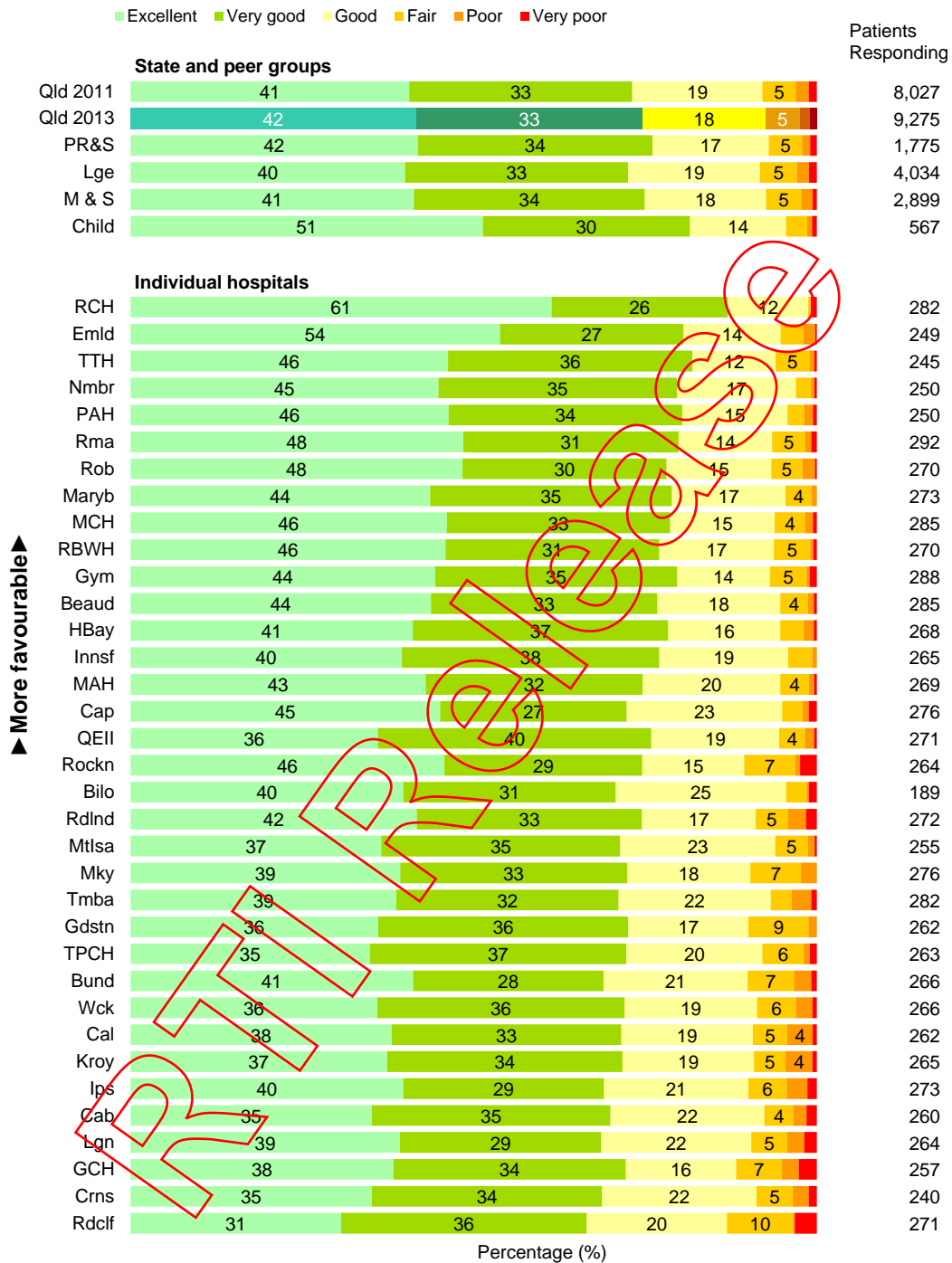
4.3 Sufficient privacy at triage

Patients or parents/guardians of patients who remembered taking part in the triage process were asked: *Were you given enough privacy when discussing (your / your child's) condition with the triage nurse?*



4.4 Courtesy of Emergency Department receptionist

All patients or parents/guardians of patients were asked: *How would you rate the courtesy of the Emergency Department receptionist?*



5 Waiting

Patients waiting in the Emergency Department want information about how long they will have to wait, and why they are waiting. Providing this information demonstrates respect and consideration for patients, carers and families. This information also assists in setting expectations.

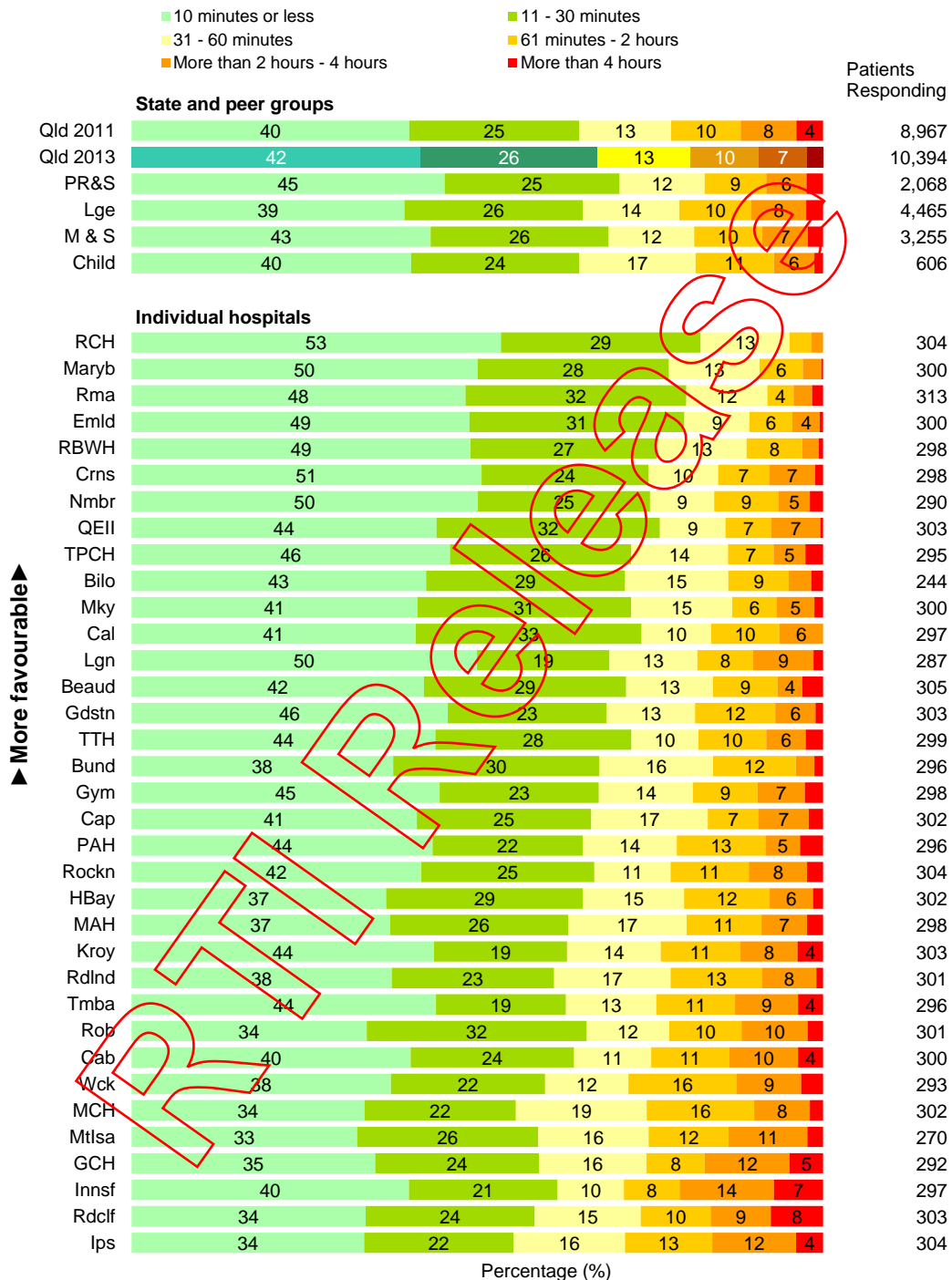
Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, were asked the following questions:

1. From the time you first arrived at the Emergency Department, how long did (you / your child) wait before being examined by a doctor or nurse?
2. Were you told how long (you / your child) would have to wait to be examined?
3. Were you told why (you / your child) had to wait to be examined?
4. At any point, did you ever feel worried that staff in the Emergency Department had forgotten about (you / your child)?

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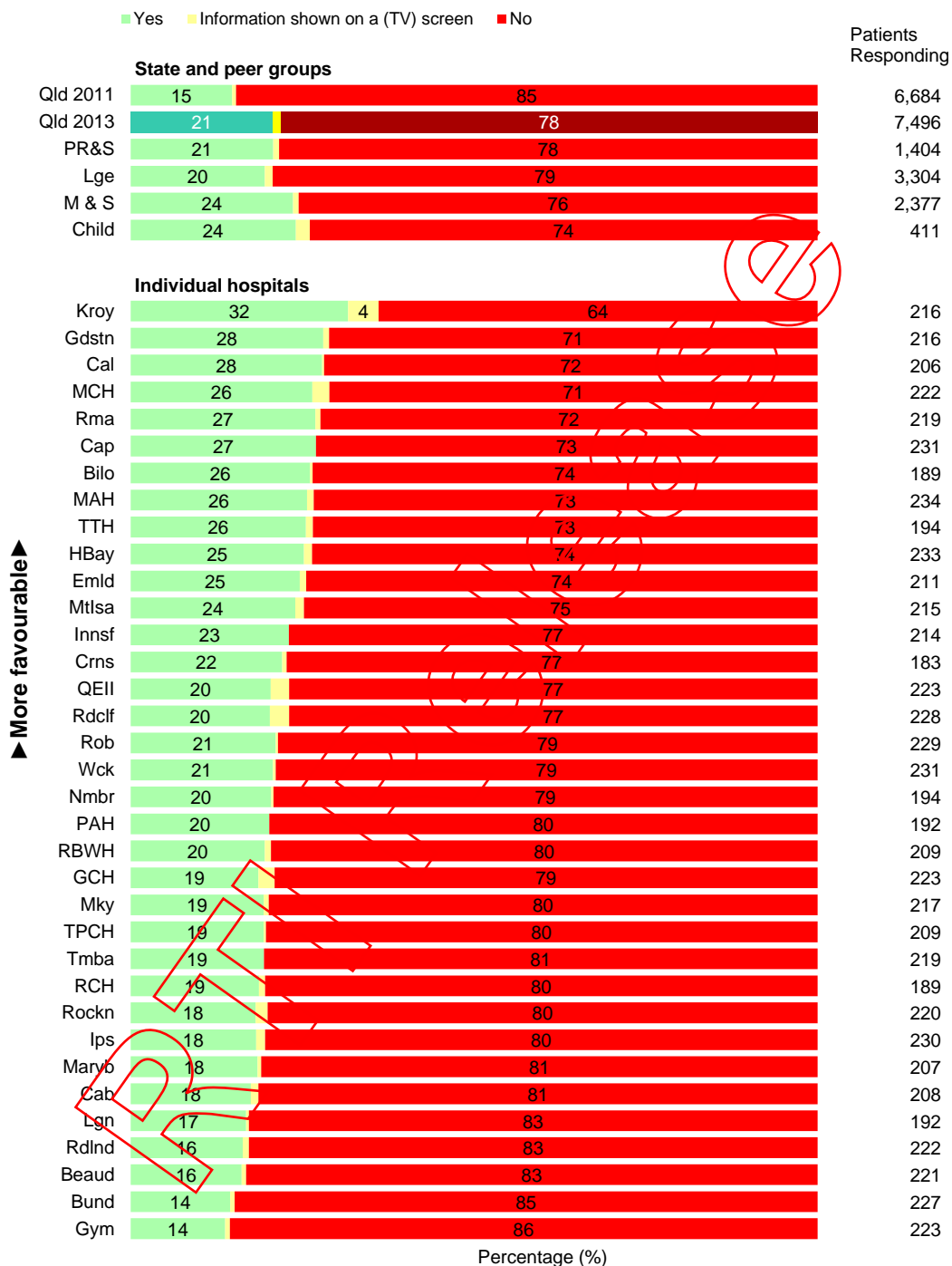
5.1 Length of time waited before being examined by a doctor or nurse

All patients or parents/guardians of patients were asked: *From the time you first arrived at the Emergency Department, how long did (you / your child) wait before being examined by a doctor or nurse?*



5.2 Told expected wait time to be examined

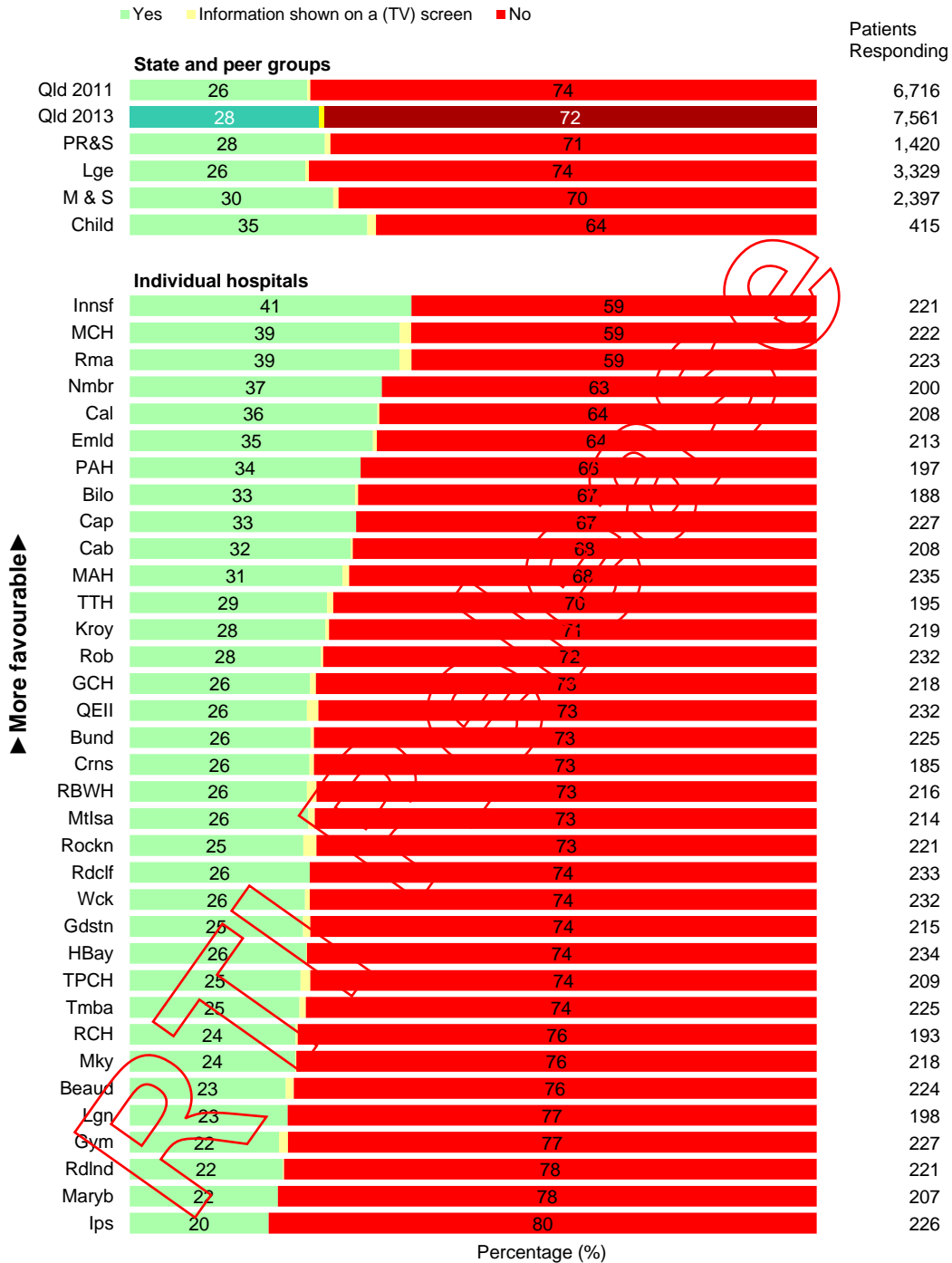
Patients or parents/guardians of patients who had to wait before being examined were asked: *Were you told how long (you / your child) would have to wait to be examined?*



The results for Queensland were significantly more favourable in **2013** than in **2011**.

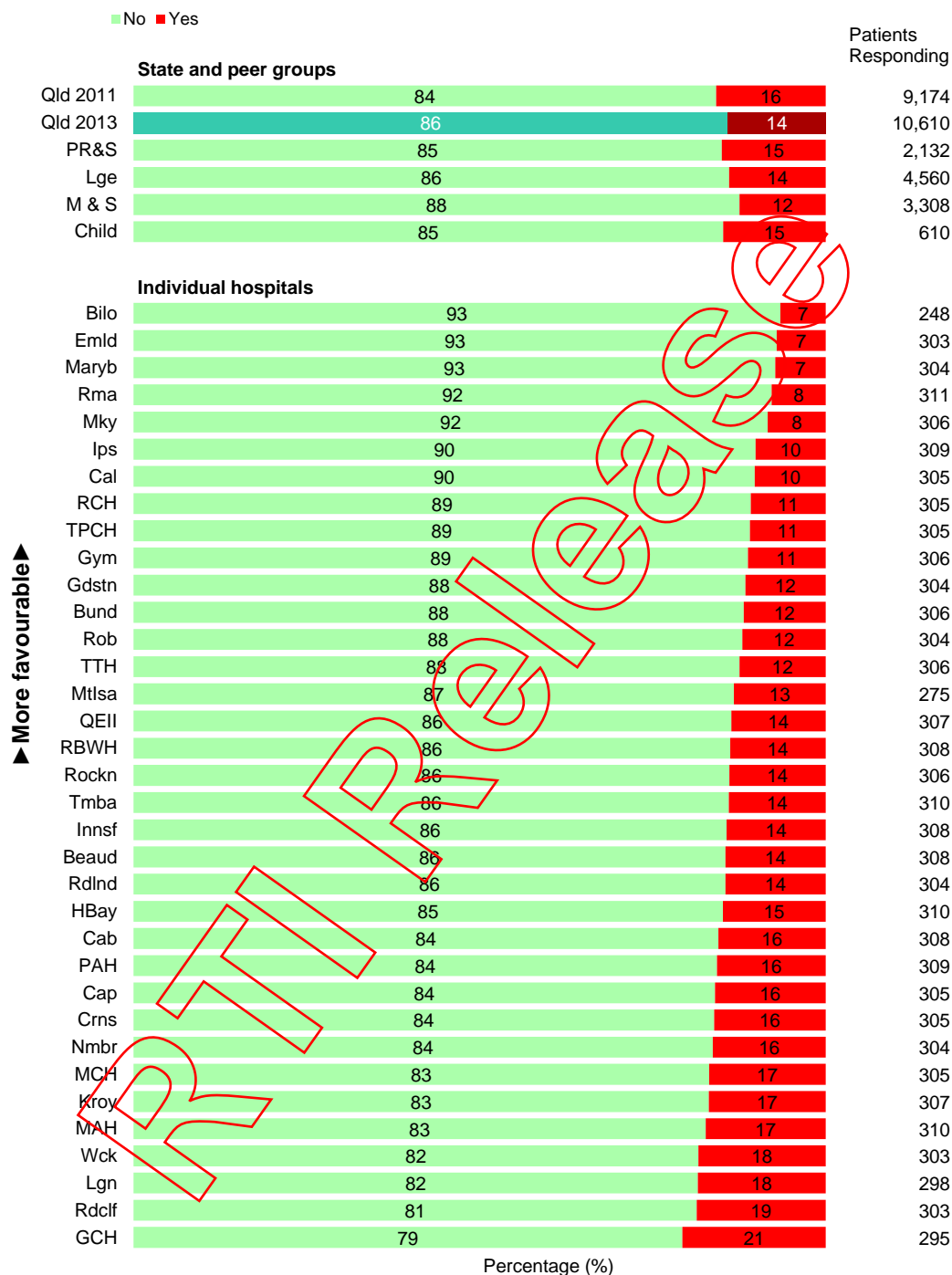
5.3 Told reason for wait to be examined

Patients or parents/guardians of patients who had to wait before being examined were asked: *Were you told why (you / your child) had to wait to be examined?*



5.4 Patients ever worried they had been forgotten

Patients or parents/guardians of patients who had to wait before being examined were asked: *At any point, did you ever feel worried that staff in the Emergency Department had forgotten about (you / your child)?*



The results for Queensland were significantly more favourable in **2013** than in **2011**.

6 Doctors and nurses

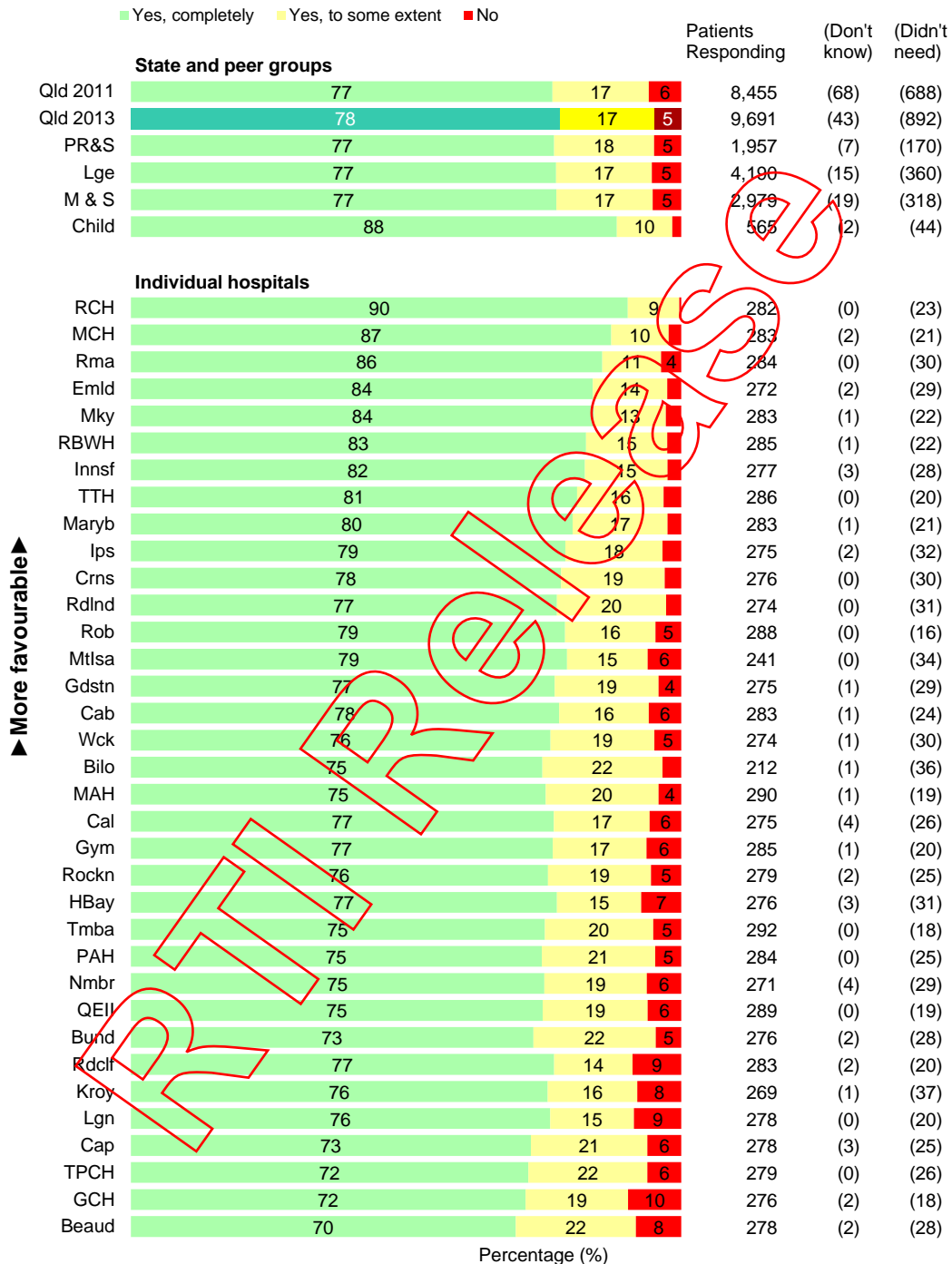
Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, were asked the following questions:

1. While you were in the Emergency Department, did a doctor or nurse explain (your / your child's) condition and treatment in a way you could understand?
2. Did the doctors and nurses listen to what you had to say?
3. Did a doctor or nurse discuss these worries or fears with you?
4. Did you have confidence and trust in the doctors and nurses examining and treating (you / your child)?
5. Sometimes doctors and nurses might talk in front of a patient as if they weren't there. Did this happen to you?

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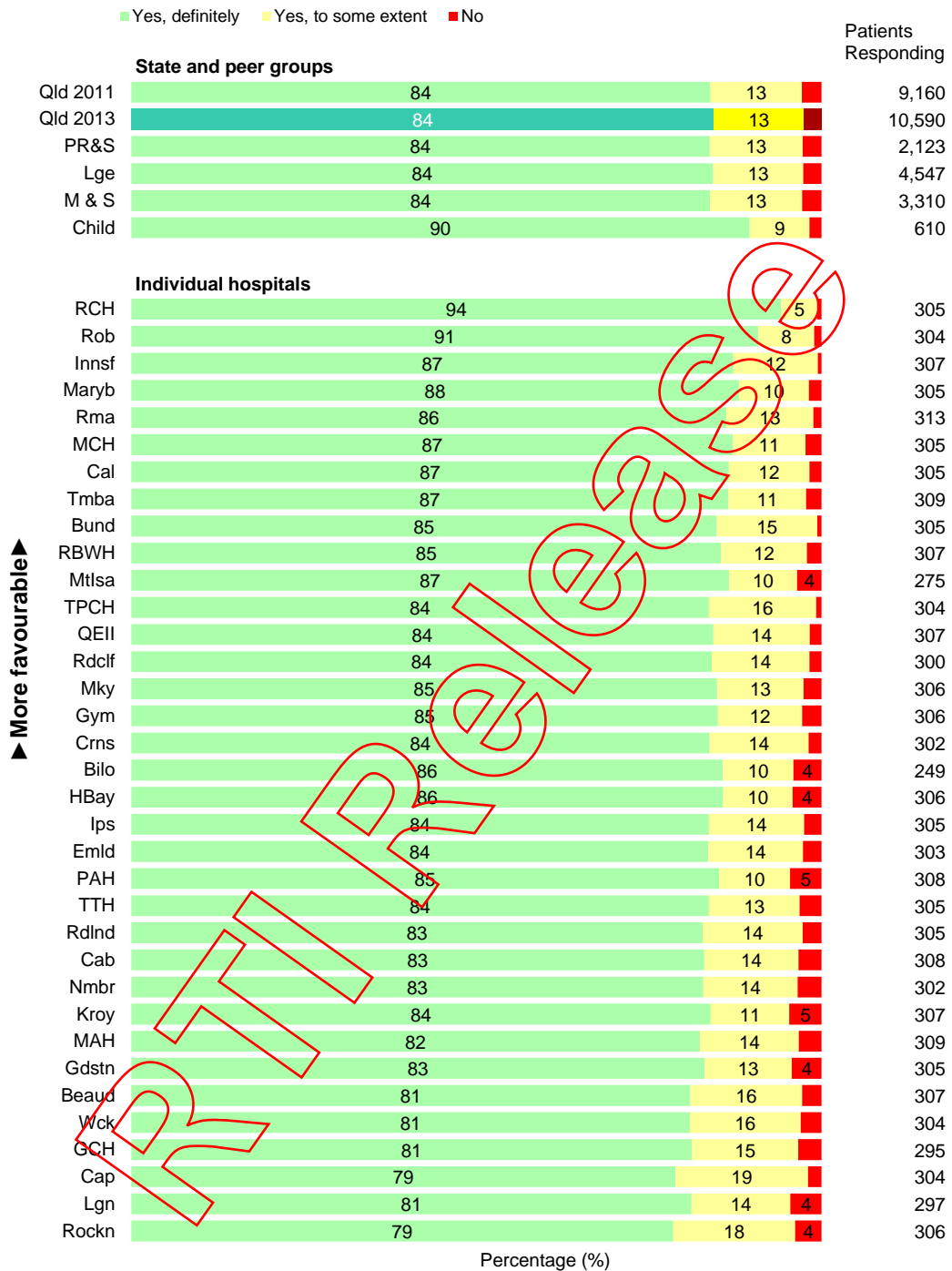
6.1 Condition and treatment explained in a way patients understood

All patients or parents/guardians of patients were asked: *While you were in the Emergency Department, did a doctor or nurse explain (your / your child's) condition and treatment in a way you could understand?*



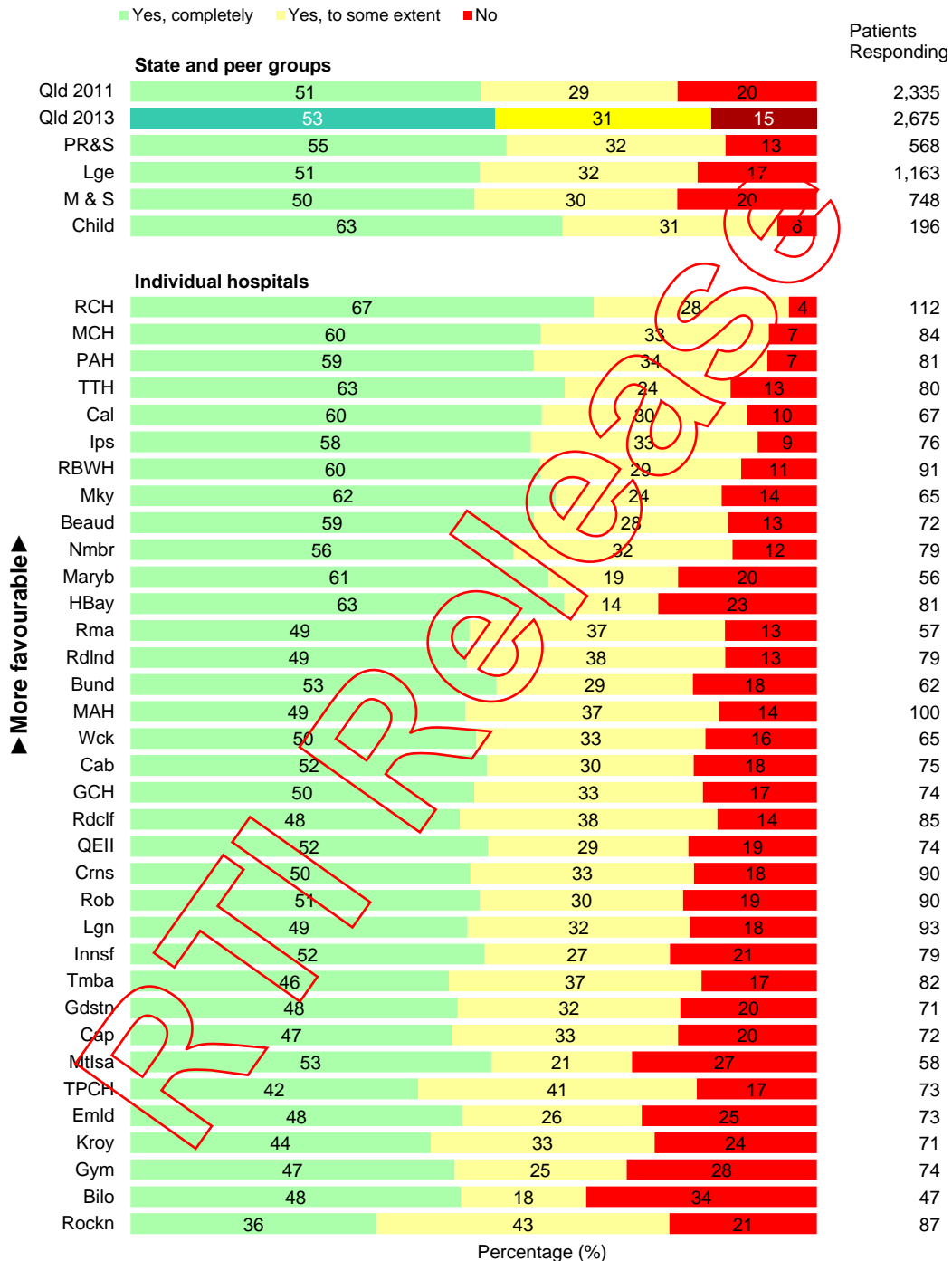
6.2 Doctors and nurses listened to patients

All patients or parents/guardians of patients were asked: *Did the doctors and nurses listen to what you had to say?*



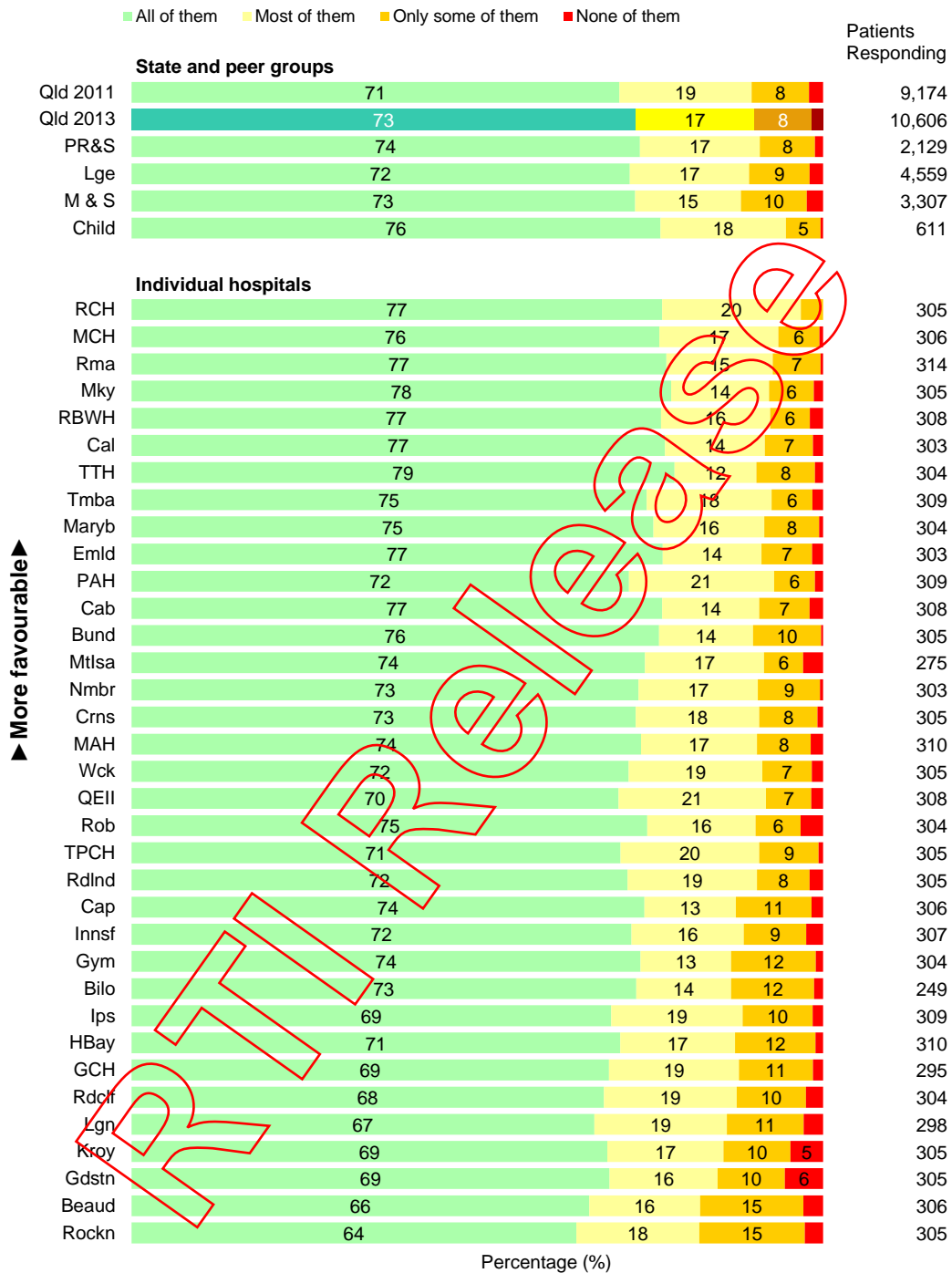
6.3 Doctor or nurse discussed patients' worries/fears about conditions or treatments

Patients or parents/guardians of patients who had worries or fears about their / their child's condition or treatment were asked: *Did a doctor or nurse discuss these worries or fears with you?*



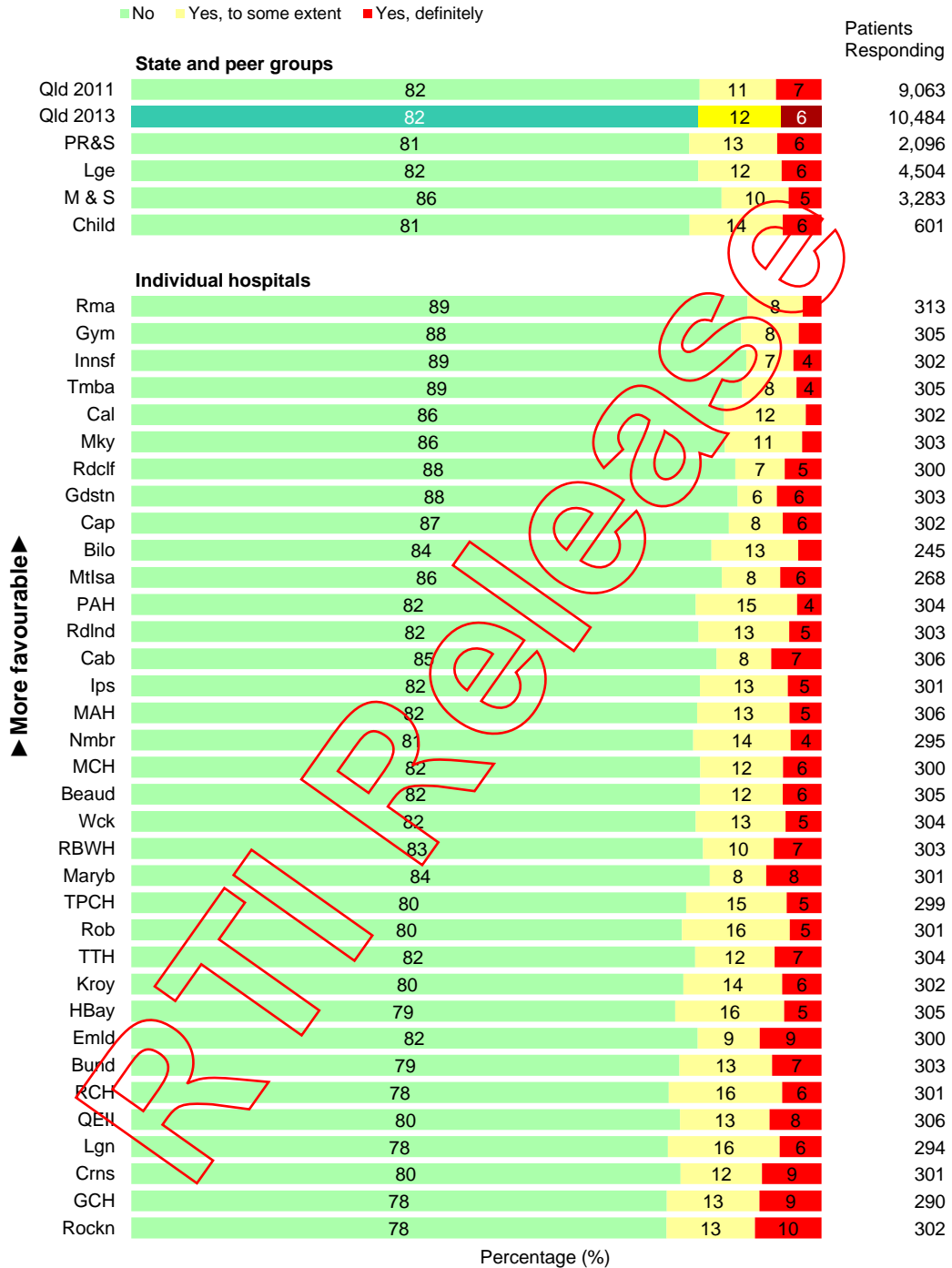
6.4 Confidence and trust in doctors and nurses

All patients or parents/guardians of patients were asked: *Did you have confidence and trust in the doctors and nurses examining and treating (you / your child)?*



6.5 Doctors and nurses talked in front of patients as if not there

All patients or parents/guardians of patients were asked: *Sometimes doctors and nurses might talk in front of a patient as if they weren't there. Did this happen to you?*



7 Care and treatment

Patient involvement in decisions about their care has multiple benefits. It encourages patients to take greater responsibility for their own health, which may lead to reducing risk factors and associated ill health. Patients involved in decisions about their care are also likely to report higher overall satisfaction with their care.

Patients are better able to engage in decisions about their care when they are provided with sufficient information.

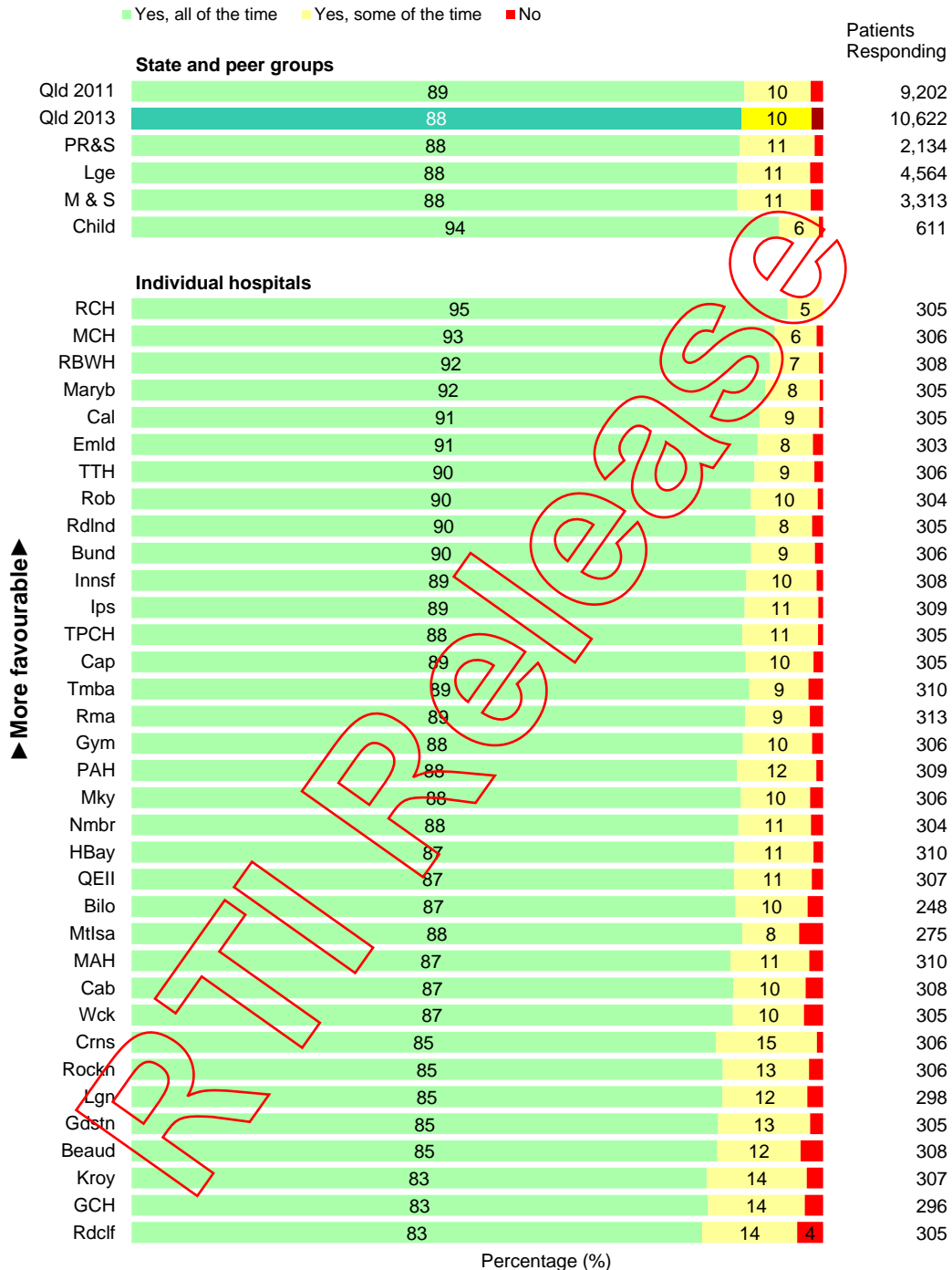
Availability of staff to attend to patients when needed is essential for patients to receive individualised care.

Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, were asked the following questions:

1. Overall, did you feel (you were / your child was) treated with respect and dignity while in the Emergency Department?
2. Overall, did you feel (you were / your child was) treated with kindness and understanding while in the Emergency Department?
3. While you were in the Emergency Department, how much information about (your / your child's) condition or treatment was given to you?
4. Did you get answers that you could understand?
5. Was this because you didn't have any questions, or for some other reason?
6. How much information about your condition or treatment was given to your family, carer or someone close to you?
7. Were (you / your child) given enough privacy when being examined or treated?
8. If (you / your child) needed attention, were you able to get a member of staff to help you?
9. Sometimes in a hospital, a member of staff may say one thing and another may say something quite different. Did this happen to you in the Emergency Department?
10. Were you involved as much as you wanted to be in decisions about (your / your child's) care and treatment?
11. How many of the staff treating and assessing (you / your child) introduced themselves?

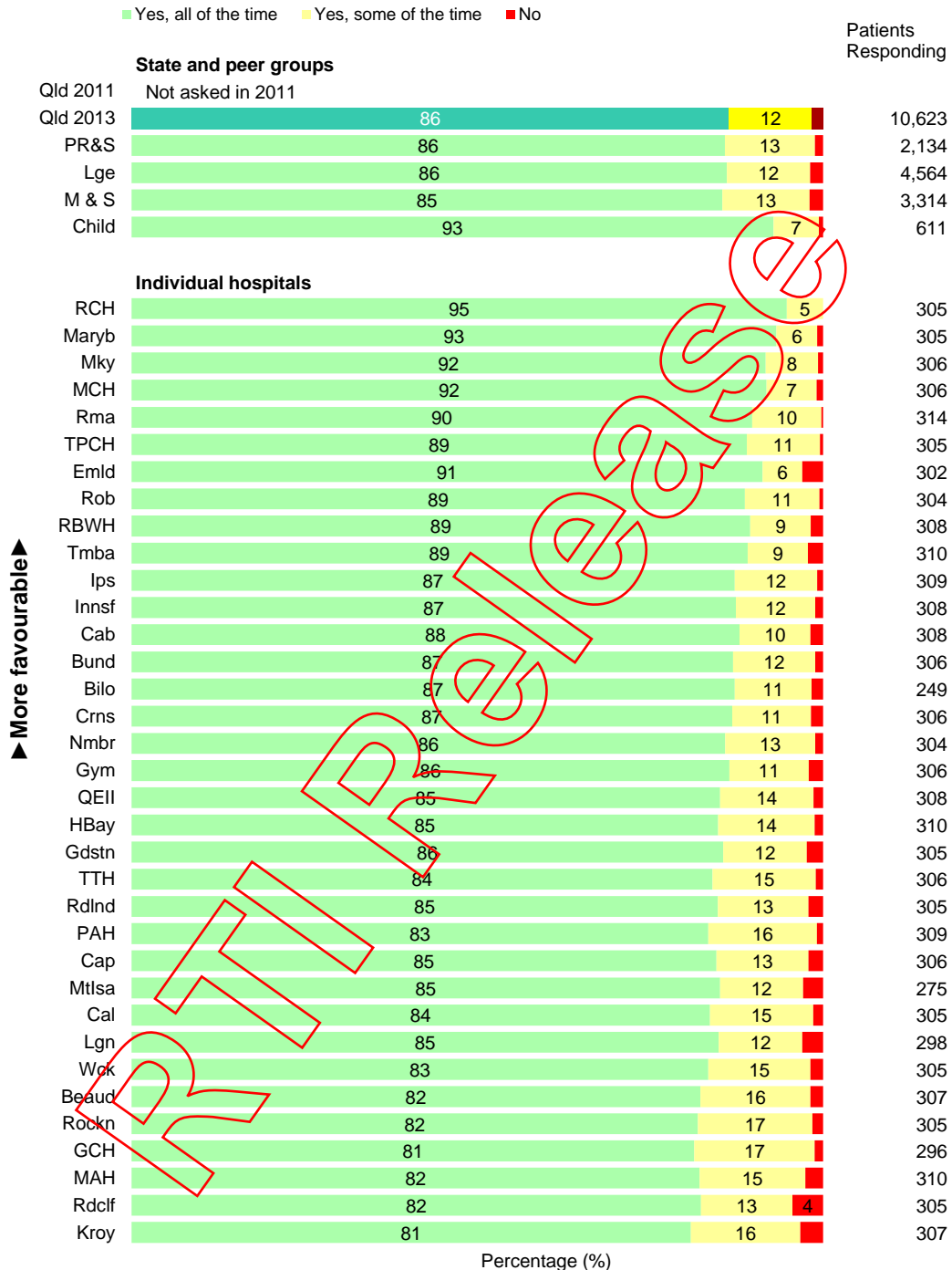
7.1 Treated with respect and dignity

All patients or parents/guardians of patients were asked: *Overall, did you feel (you were / your child was) treated with respect and dignity while in the Emergency Department?*



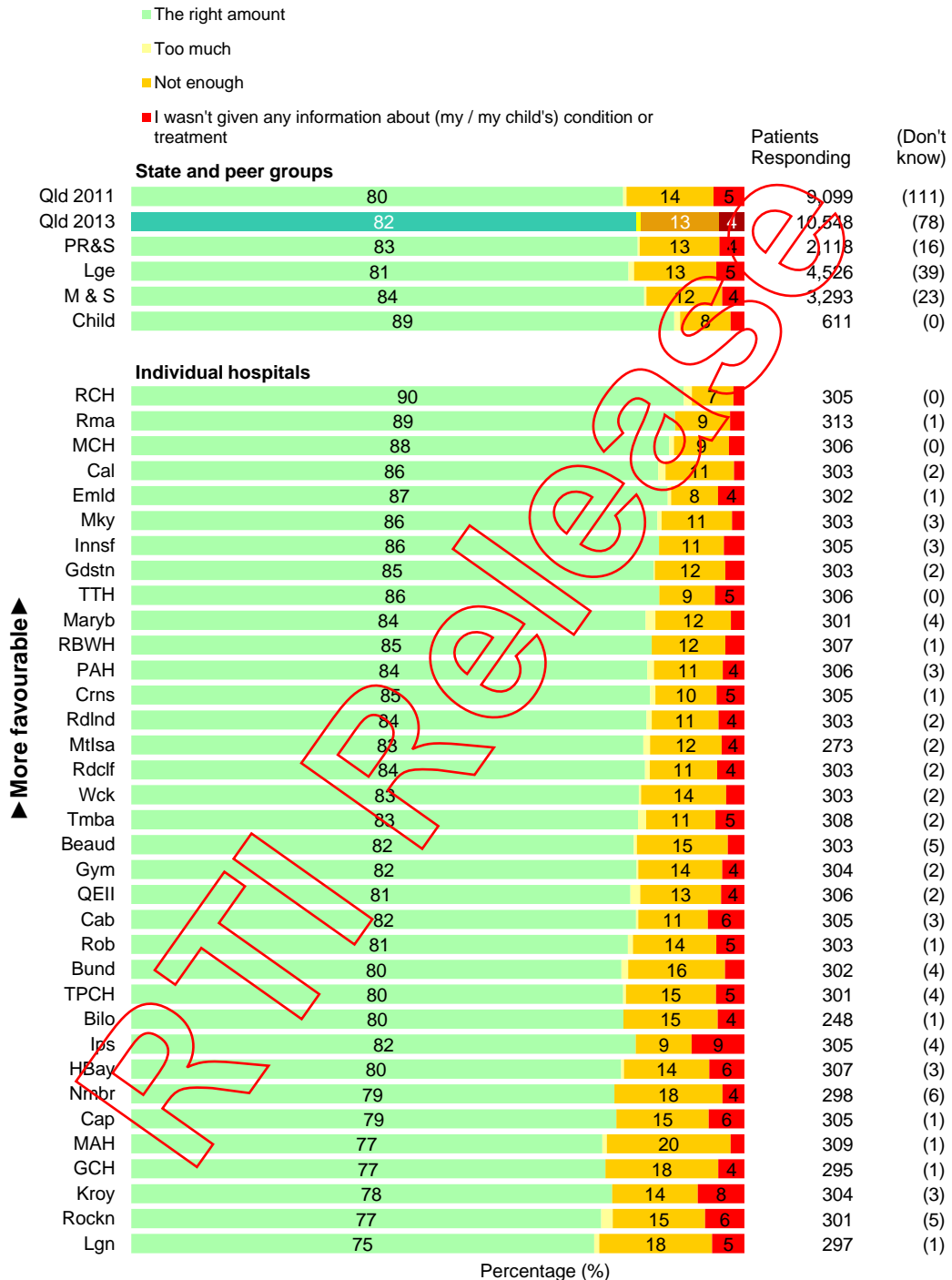
7.2 Treated with kindness and understanding

All patients or parents/guardians of patients were asked: *Overall, did you feel (you were / your child was) treated with kindness and understanding while in the Emergency Department?*



7.3 Amount of information about condition or treatment provided

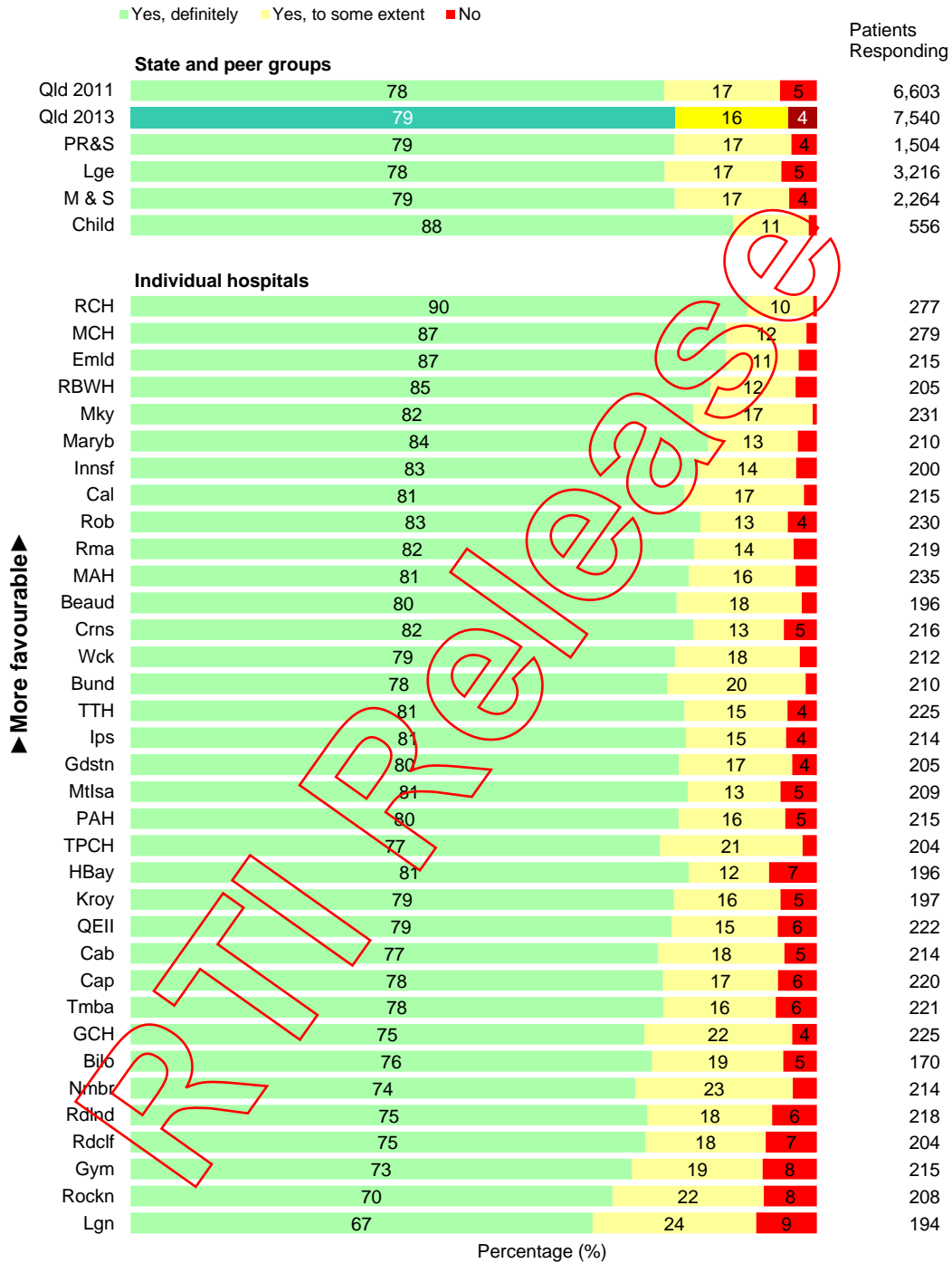
All patients or parents/guardians of patients were asked: *While you were in the Emergency Department, how much information about (your / your child's) condition or treatment was given to you?*



The results for Queensland were significantly more favourable in 2013 than in 2011.

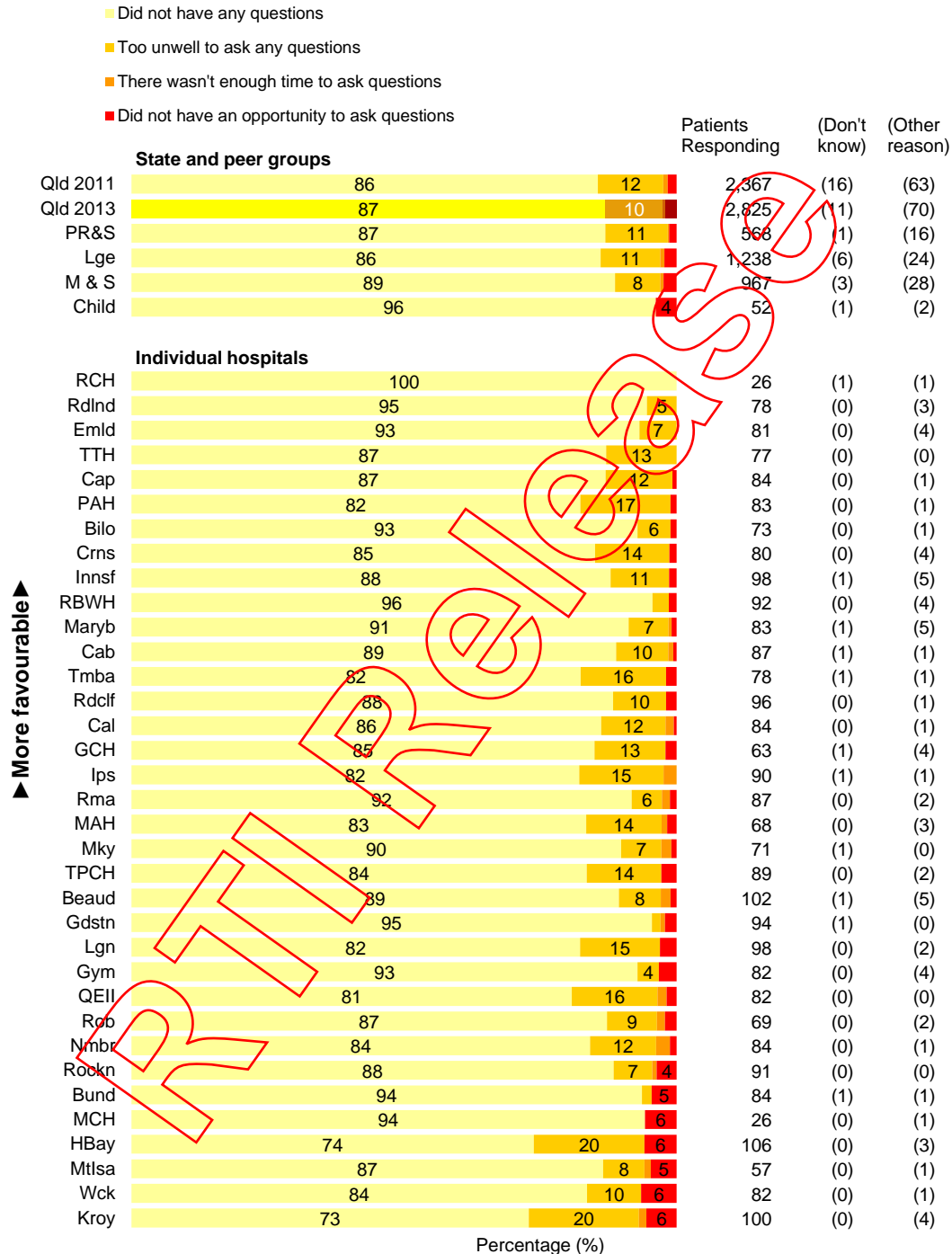
7.4 Understandable answers to patients' questions

Patients or parents/guardians of patients who asked questions about their / their child's care and treatment were asked: *Did you get answers that you could understand?*



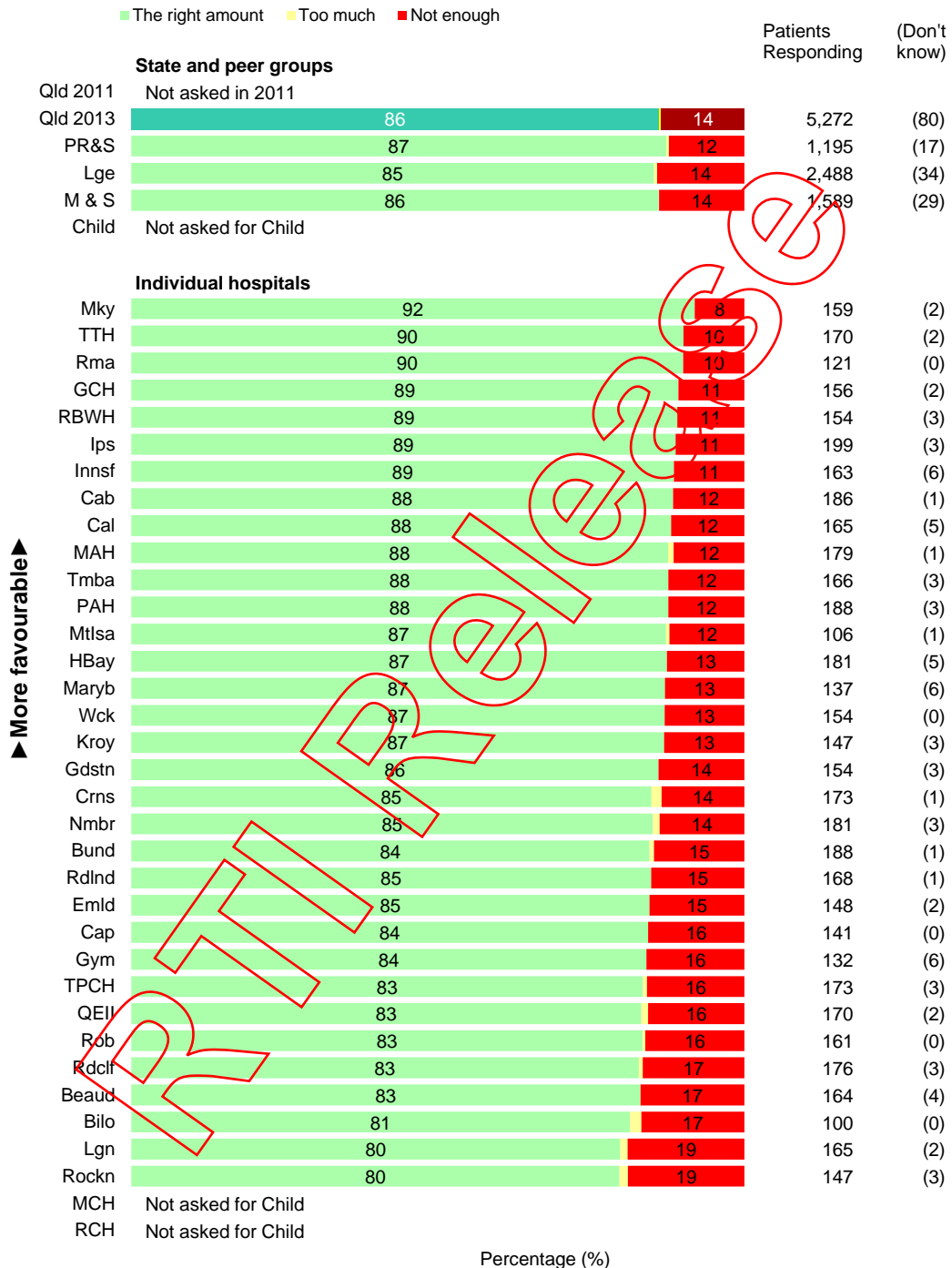
7.5 Reasons patient did not ask questions about care and treatment

Patients or parents/guardians of patients who didn't ask questions about their / their child's care and treatment were asked: *Was this because you didn't have any questions, or for some other reason?*



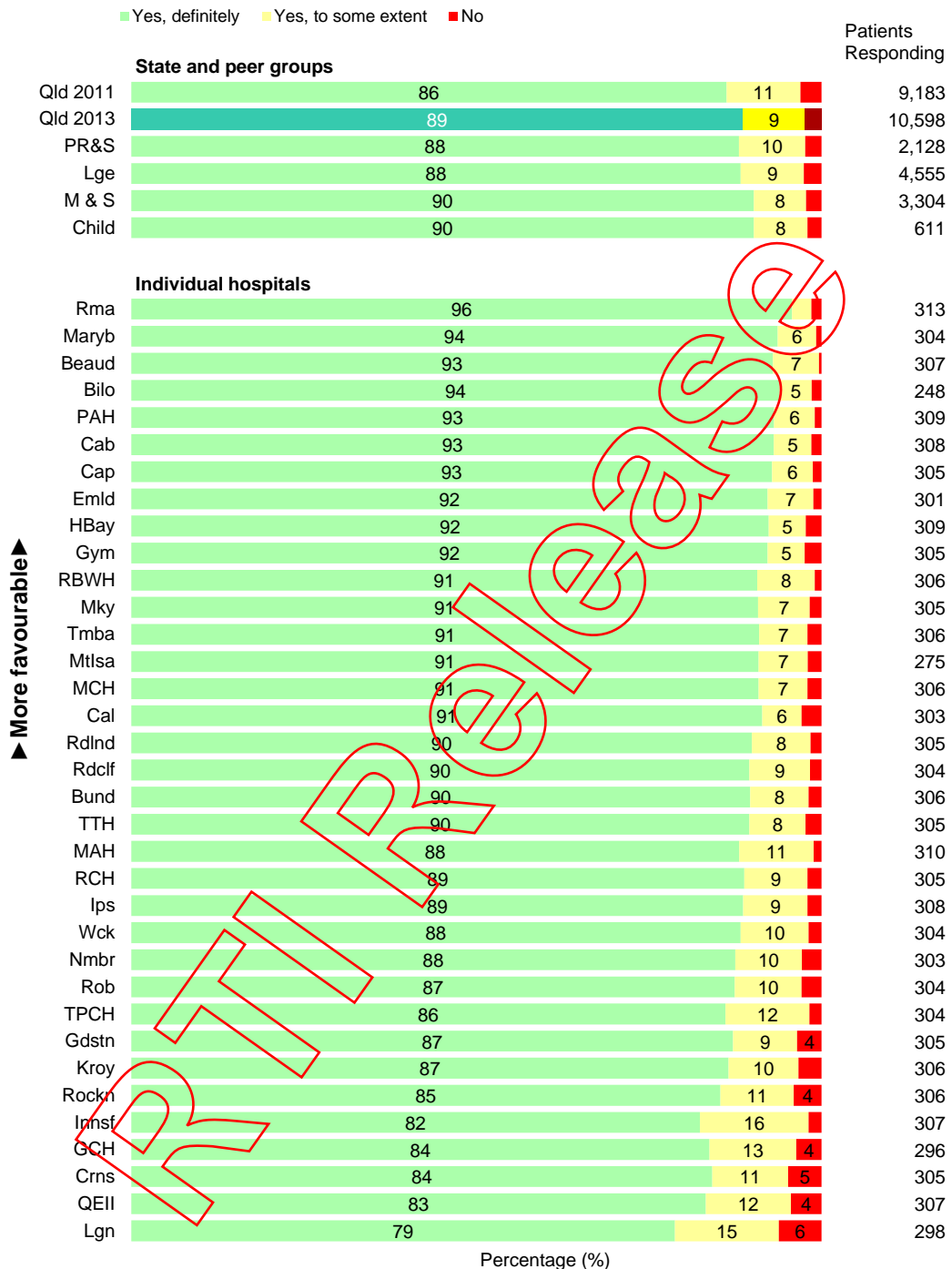
7.6 Amount of information about condition or treatment provided to family, carer, someone else

All patients or parents/guardians of patients were asked: *How much information about your condition or treatment was given to your family, carer or someone close to you?*



7.7 Sufficient privacy during examination or treatment

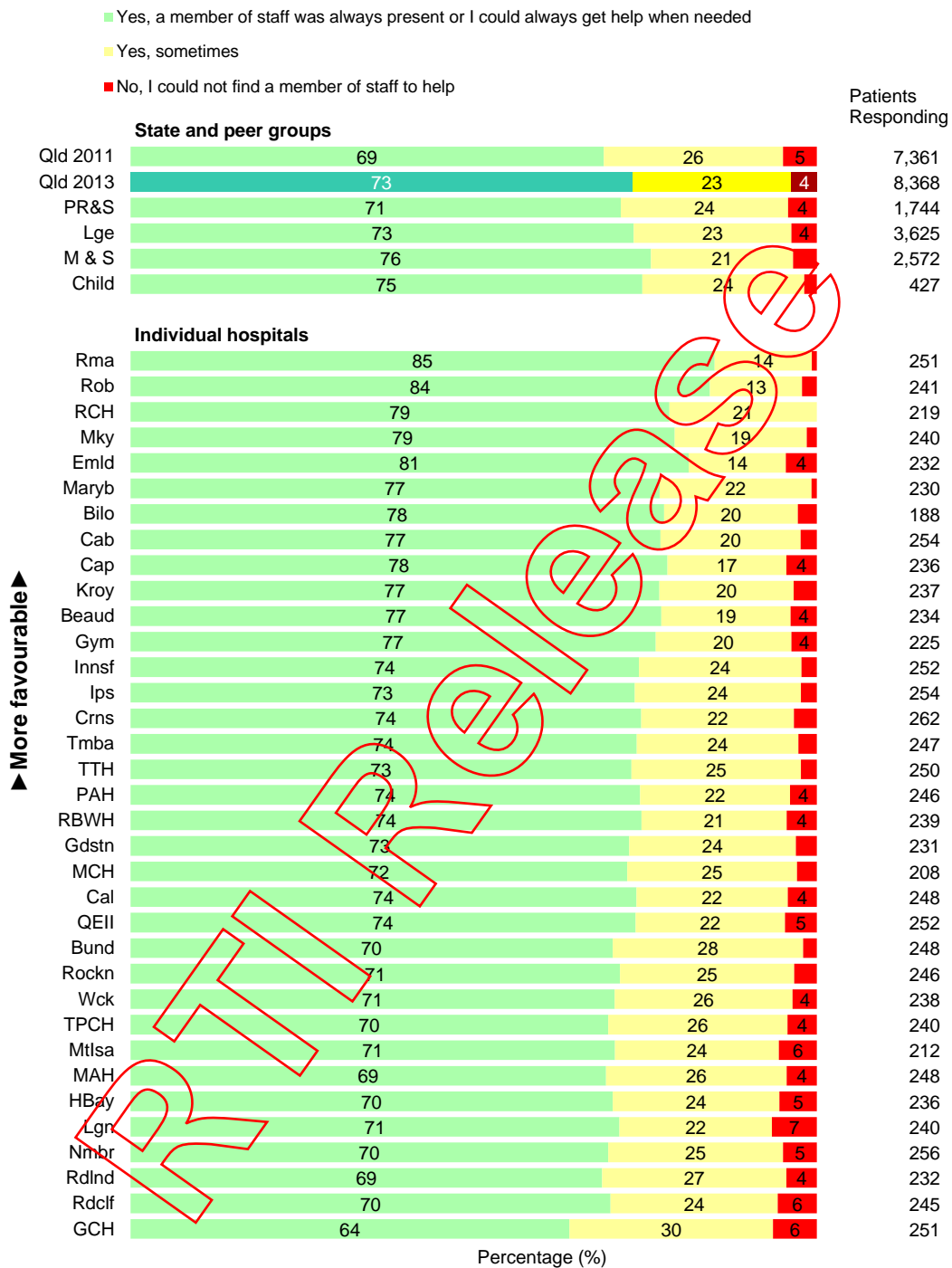
All patients or parents/guardians of patients were asked: *Were (you / your child) given enough privacy when being examined or treated?*



The results for Queensland were significantly more favourable in **2013** than in **2011**.

7.8 Assistance from staff when needed

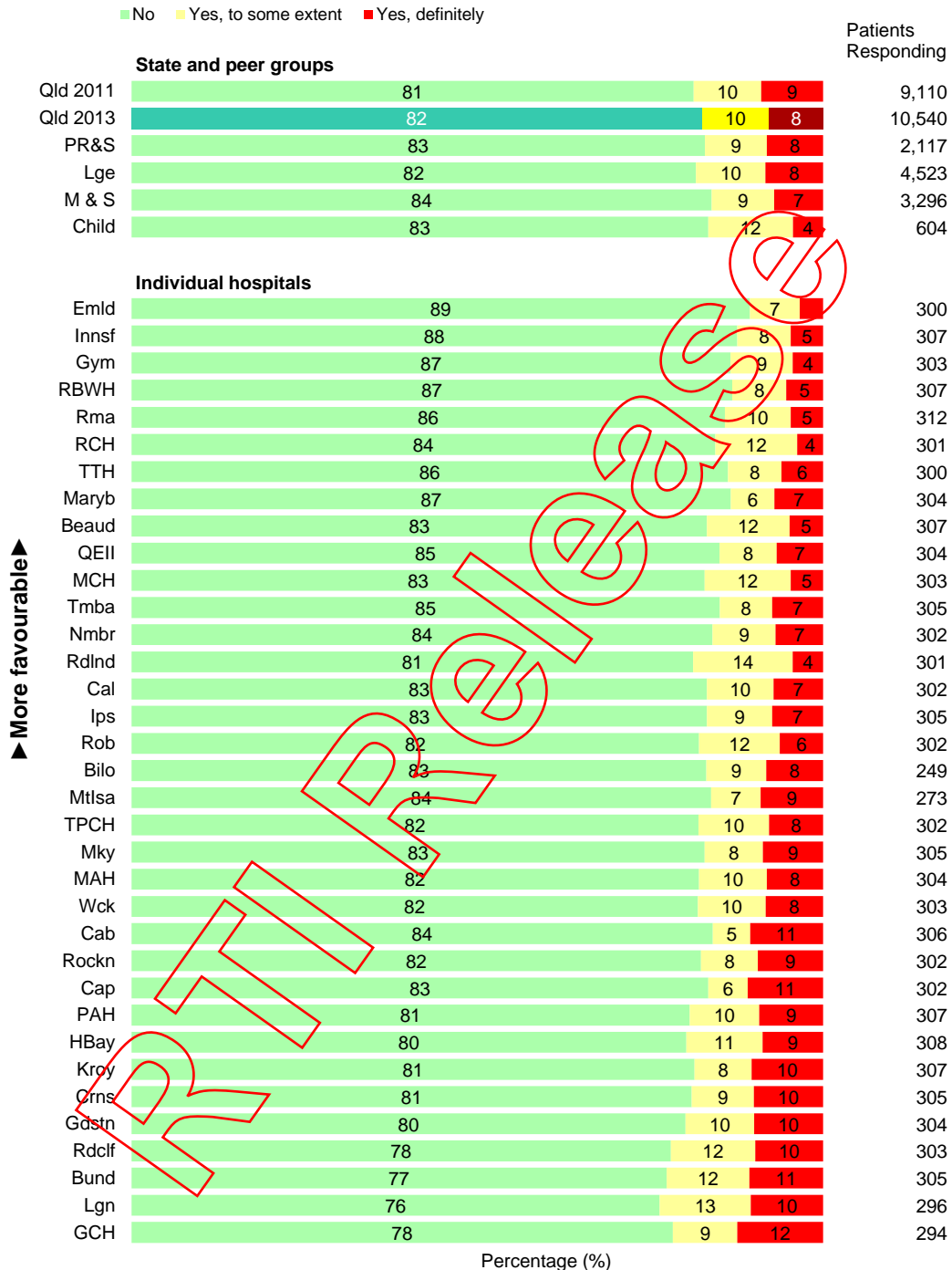
All patients or parents/guardians of patients were asked: *If (you / your child) needed attention, were you able to get a member of staff to help you?*



The results for Queensland were significantly more favourable in **2013** than in **2011**.

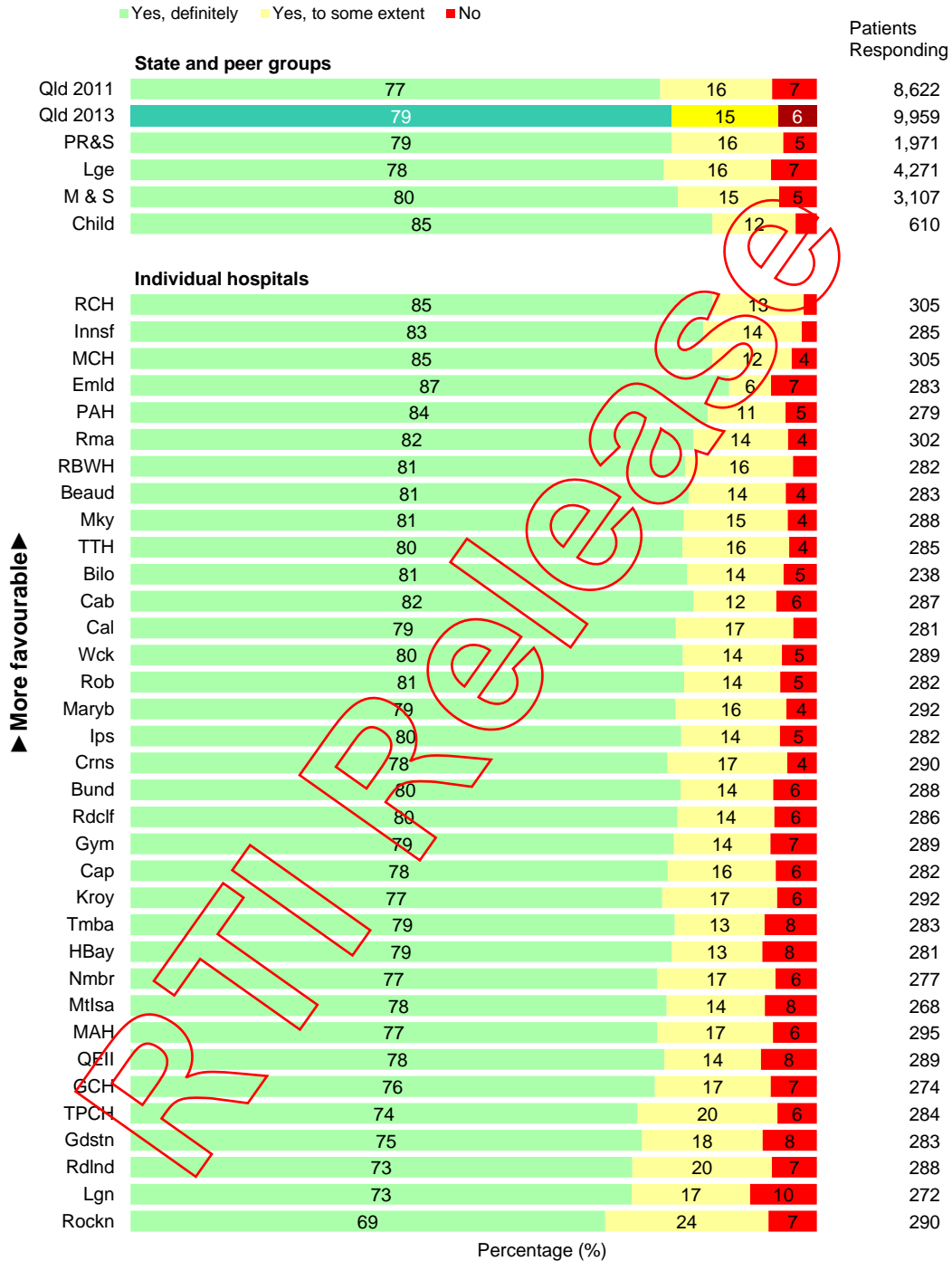
7.9 Conflicting information provided by staff

All patients or parents/guardians of patients were asked: *Sometimes in a hospital, a member of staff may say one thing and another may say something quite different. Did this happen to you in the Emergency Department?*



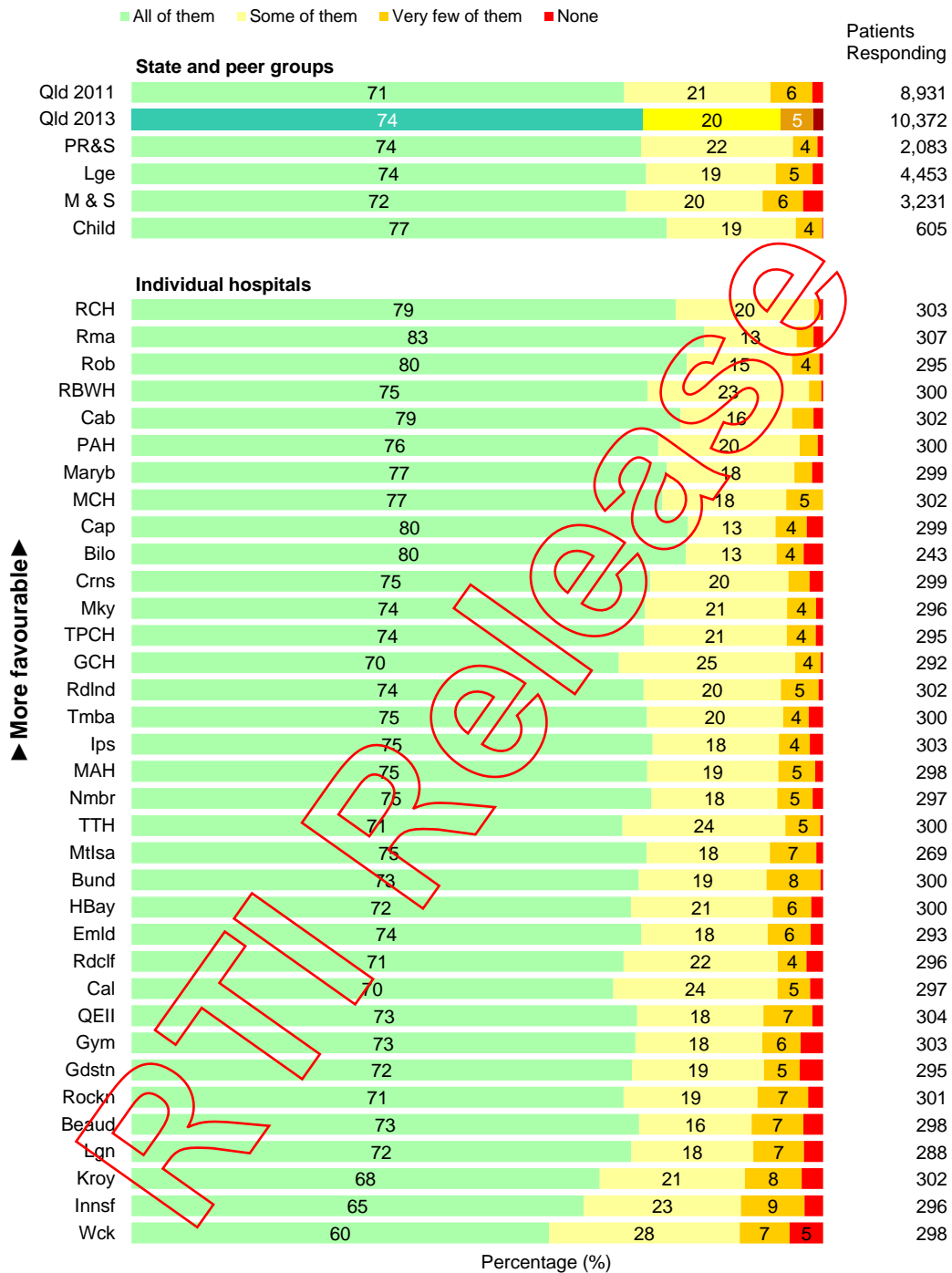
7.10 Involved as much as desired in decisions about care and treatment

All patients or parents/guardians of patients were asked: *Were you involved as much as you wanted to be in decisions about (your / your child's) care and treatment?*



7.11 How many staff introduced themselves

All patients or parents/guardians of patients were asked: *How many of the staff treating and assessing (you / your child) introduced themselves?*



The results for Queensland were significantly more favourable in **2013** than in **2011**.

8 Tests

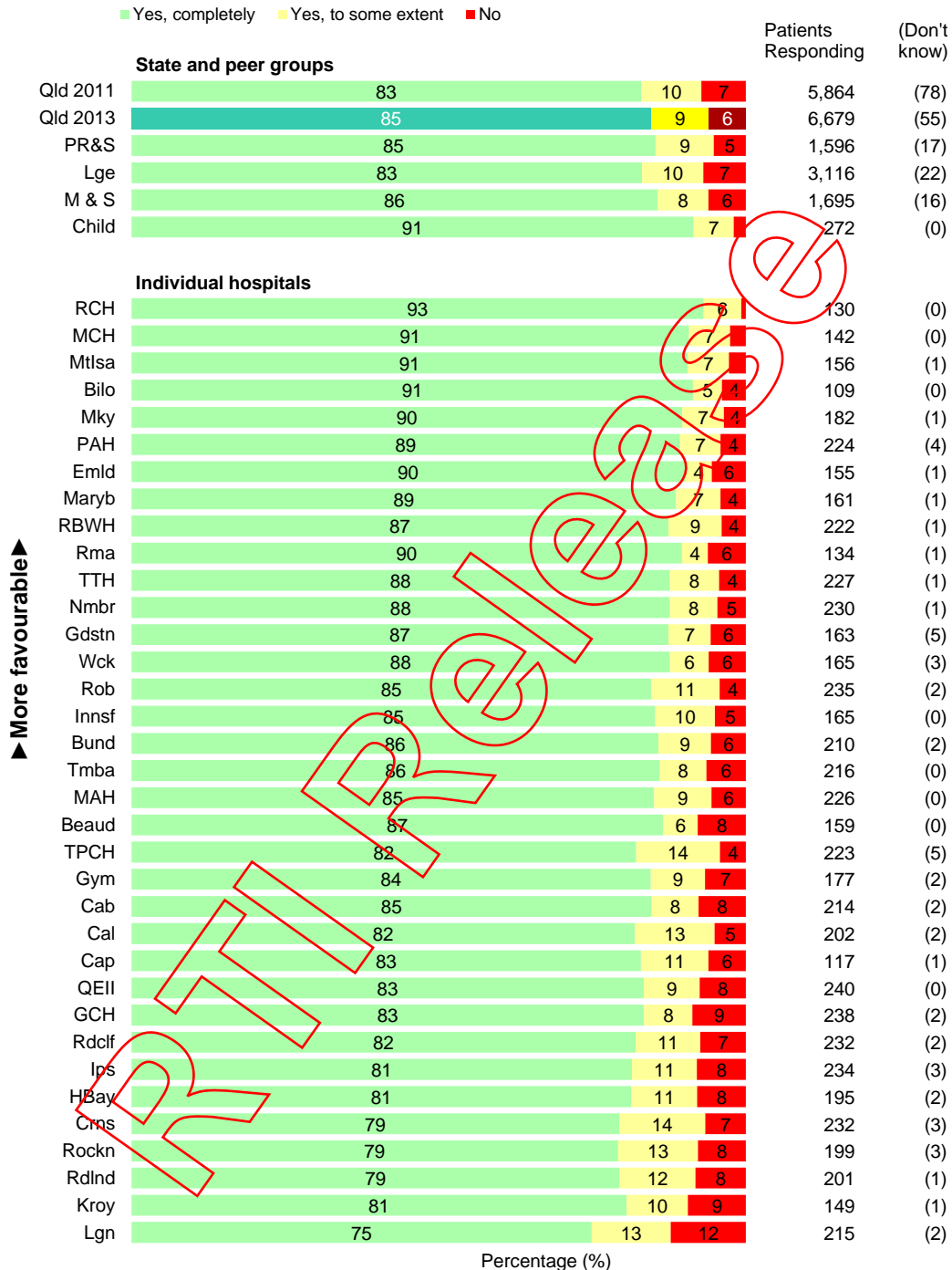
Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, who had tests during the Emergency Department visit, were asked the following questions:

1. Did a member of staff explain why (you / your child) needed these tests in a way you could understand?
2. Did a member of staff explain the results of the tests in a way you could understand?

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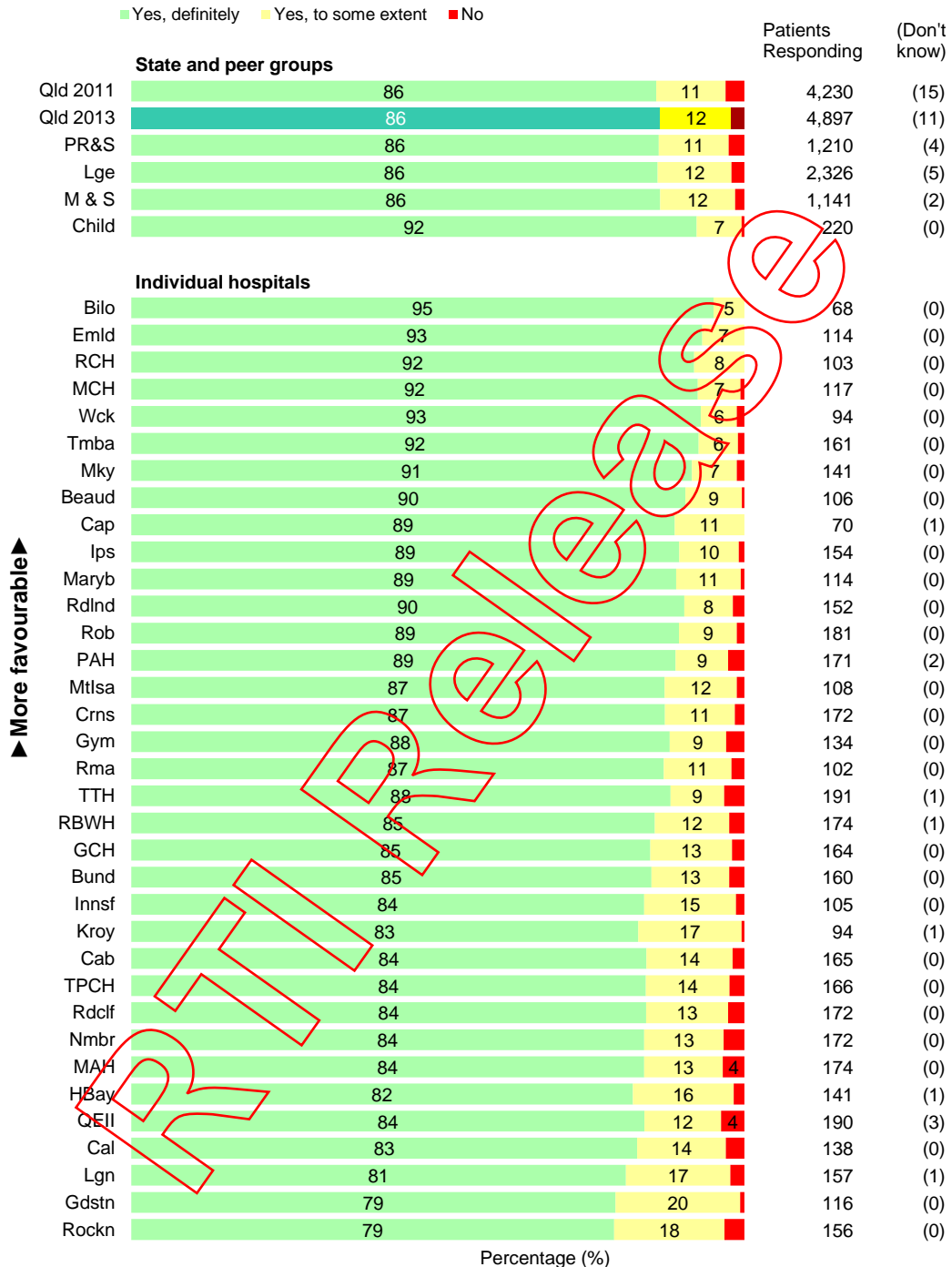
8.1 Reason for tests explained in understandable way

Patients or parents/guardians of patients who had tests during the Emergency Department visit were asked: *Did a member of staff explain why (you / your child) needed these tests in a way you could understand?*



8.2 Test results explained in understandable way

Patients or parents/guardians of patients who received test results before leaving the Emergency Department were asked: *Did a member of staff explain the results of the tests in a way you could understand?*



9 Pain

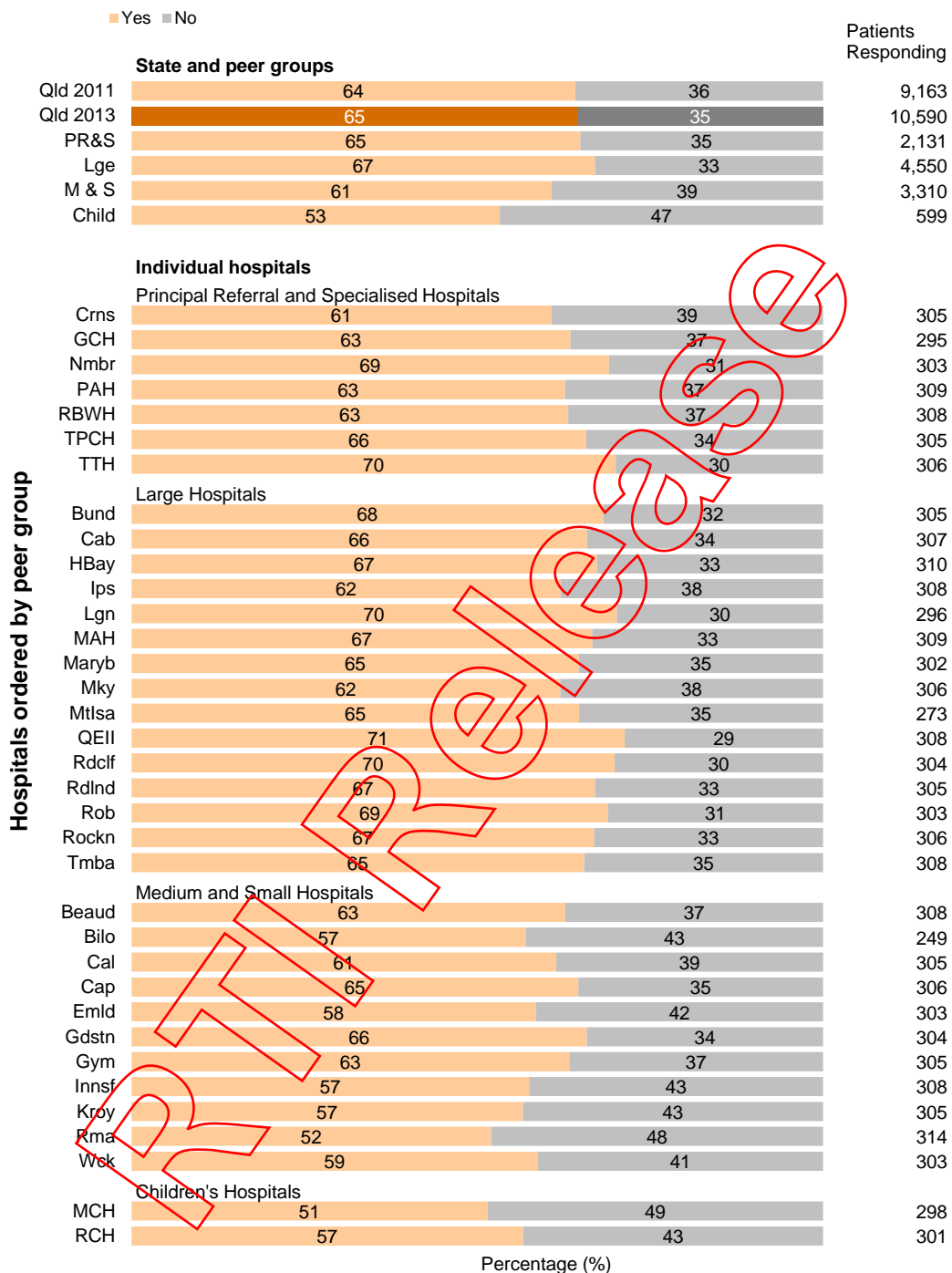
Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, were asked the following questions:

1. Were (you / your child) in any pain while in the Emergency Department?
2. Do you think the Emergency Department staff did everything they could to help control (your / your child's) pain?

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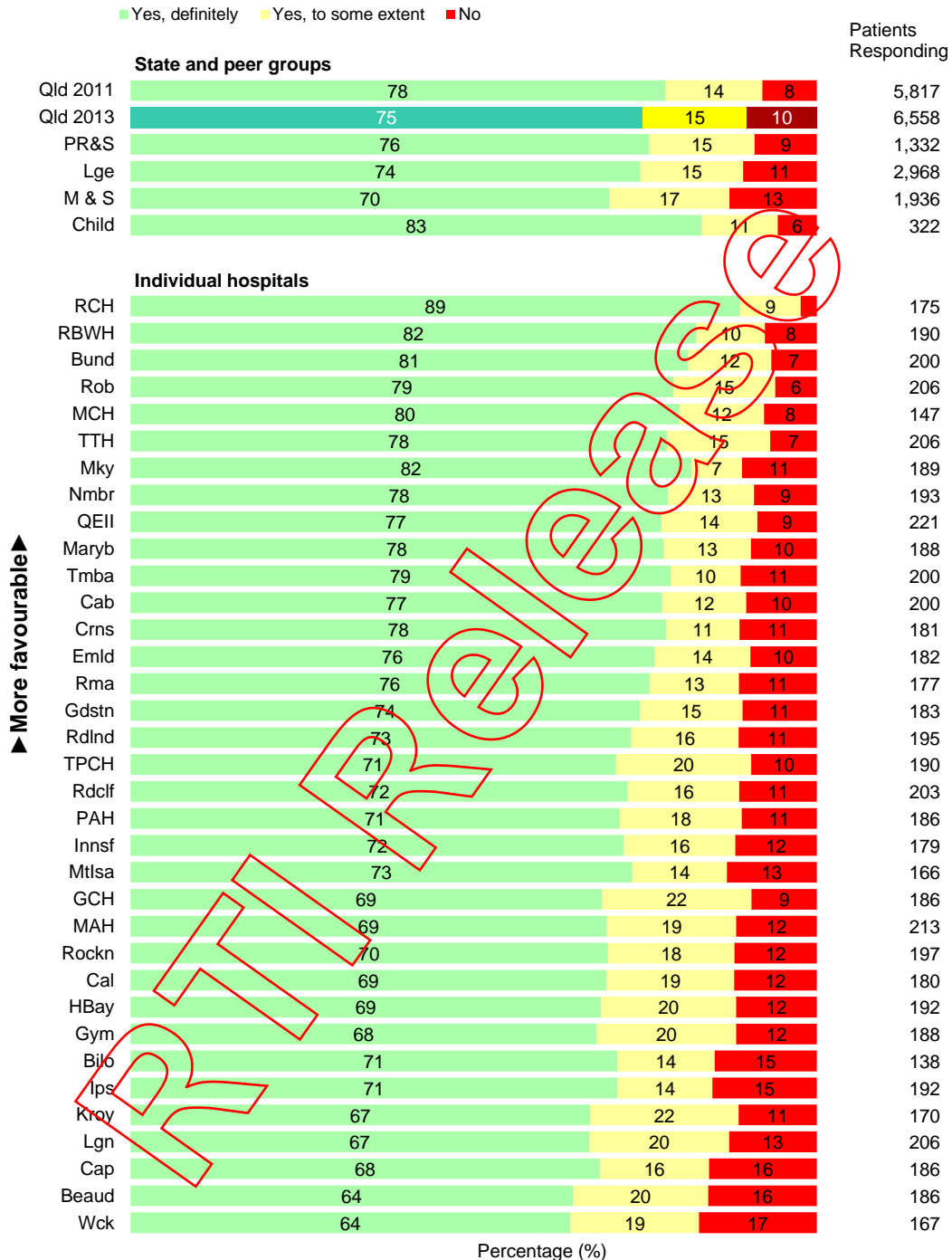
9.1 In pain

All patients or parents/guardians of patients were asked: *Were (you / your child) in any pain while in the Emergency Department?*



9.2 Everything possible done to control pain

Patients or parents/guardians of patients who were in pain while in the Emergency Department were asked: *Do you think the Emergency Department staff did everything they could to help control (your / your child's) pain?*



The results for Queensland were significantly less favourable in 2013 than in 2011.

10 Environment and facilities

Violence and aggression in Emergency Departments can be a problem. Aggressive behaviour is likely to have an impact on patients, family, carers, and staff.

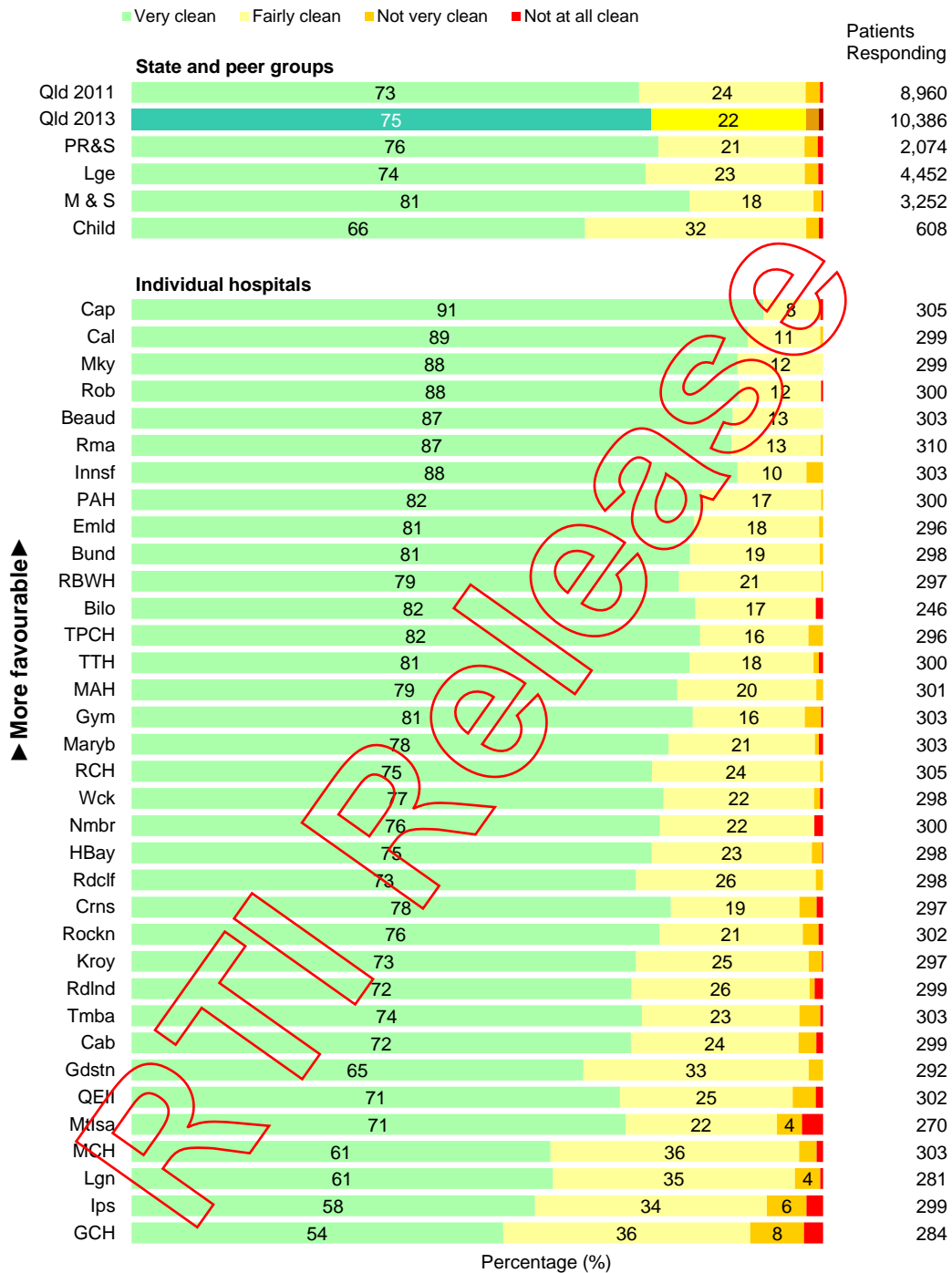
Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, were asked the following questions:

1. In your opinion, how clean was the Emergency Department?
2. How clean were the toilets in the Emergency Department?
3. Were (you / your child) able to get suitable food or drinks when you were in the Emergency Department?
4. While you were in the Emergency Department, did you feel bothered or threatened by other patients or visitors?

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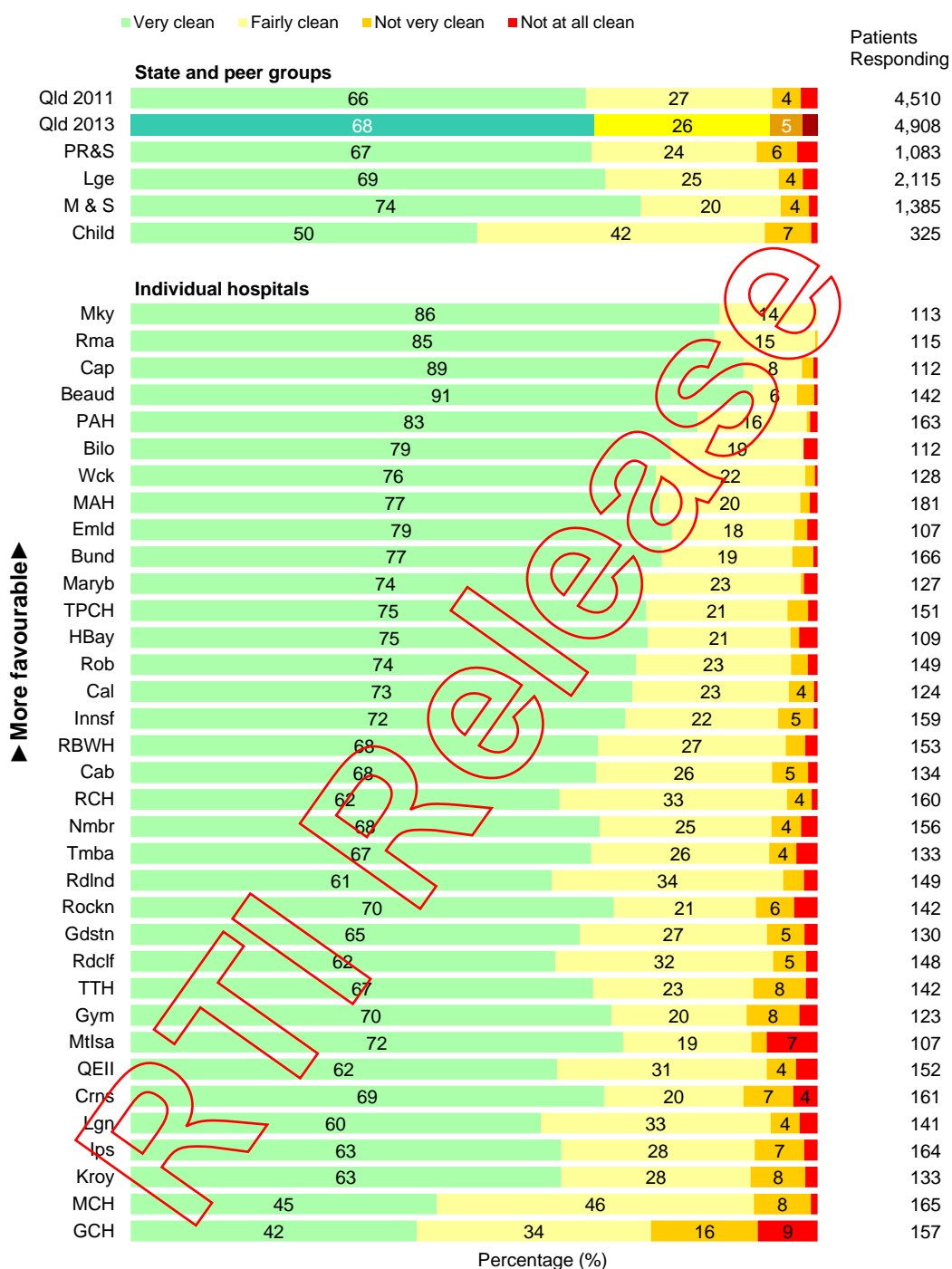
10.1 Cleanliness of Emergency Department

All patients or parents/guardians of patients were asked: *In your opinion, how clean was the Emergency Department?*



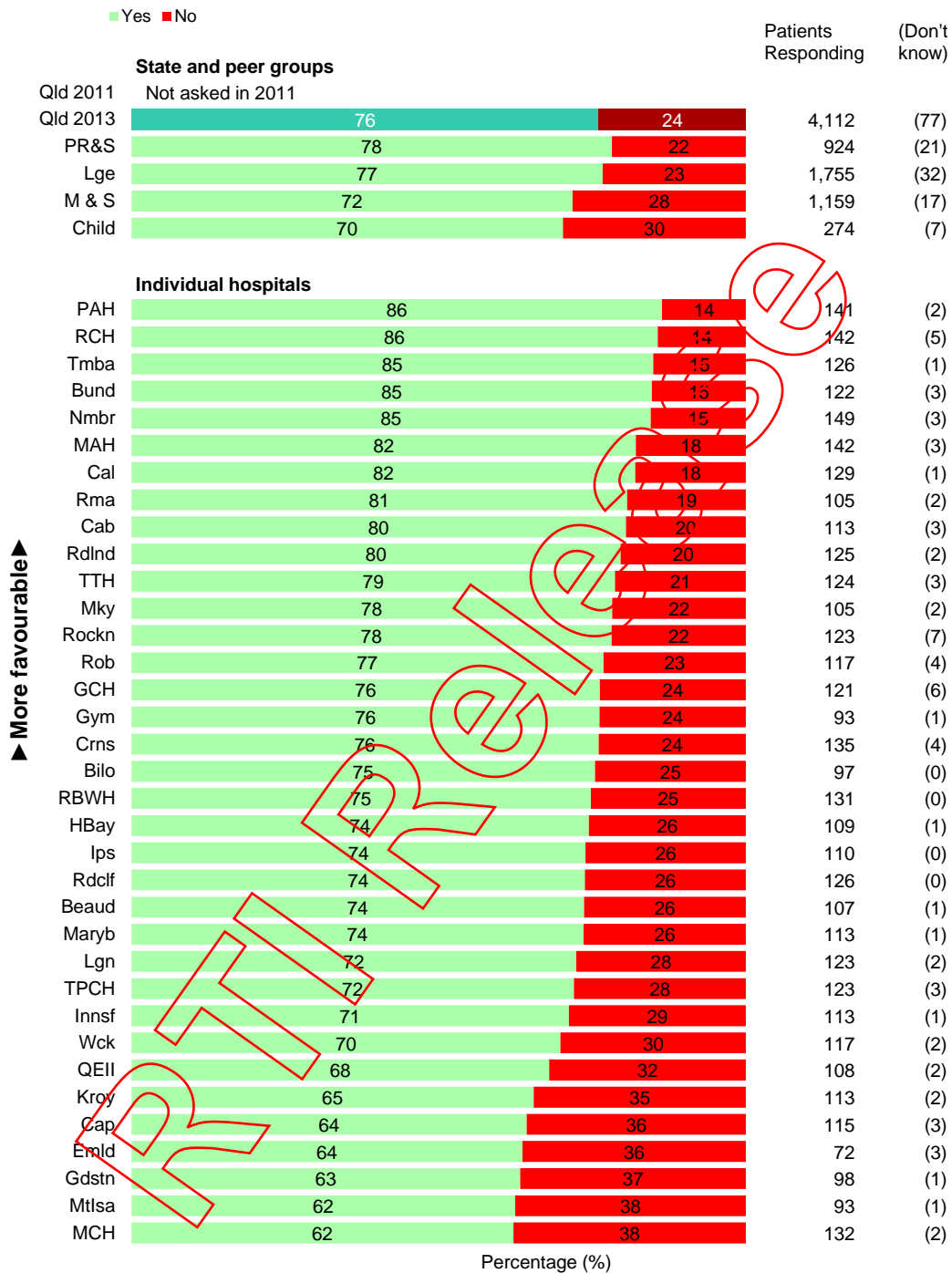
10.2 Cleanliness of toilets

All patients or parents/guardians of patients were asked: *How clean were the toilets in the Emergency Department?*



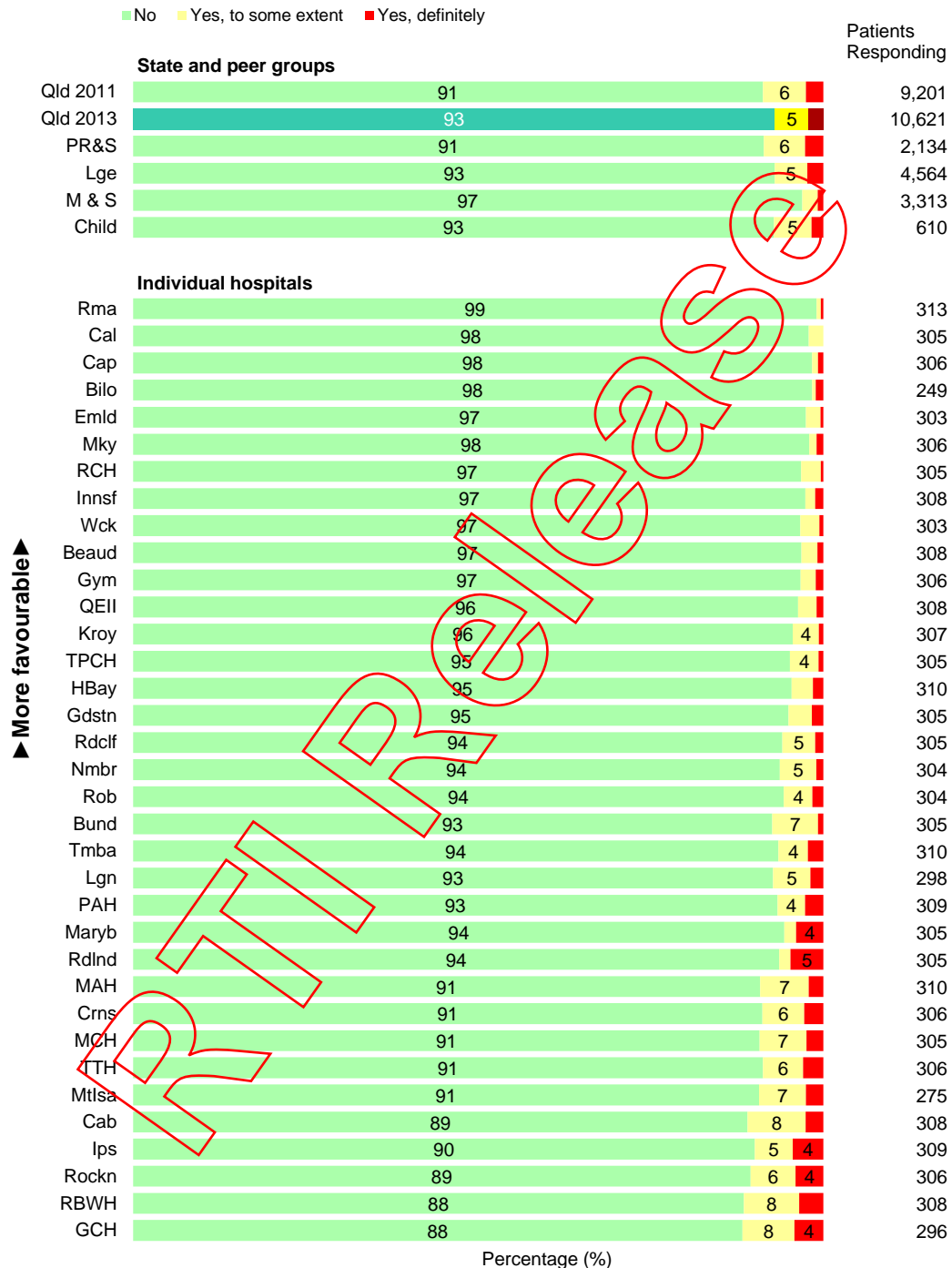
10.3 Availability of food and drink

All patients or parents/guardians of patients were asked: *Were (you / your child) able to get suitable food or drinks when you were in the Emergency Department?*



10.4 Patients feeling bothered or threatened by patients/visitors

All patients or parents/guardians of patients were asked: *While you were in the Emergency Department, did you feel bothered or threatened by other patients or visitors?*



The results for Queensland were significantly more favourable in **2013** than in **2011**.

11 Leaving the Emergency Department - Delays

Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, were asked whether or not they were delayed for each of the following reasons:

1. Equipment or aids, such as crutches
2. Medications
3. Someone to discharge (you / your child), e.g. the doctor
4. Test results
5. Letter for (your / your child's) doctor
6. An ambulance or hospital transport
7. Other transport
8. Services after leaving hospital to be arranged, e.g. social services/follow up
9. Something else (please specify)

These questions were then combined into the following measures for reporting:

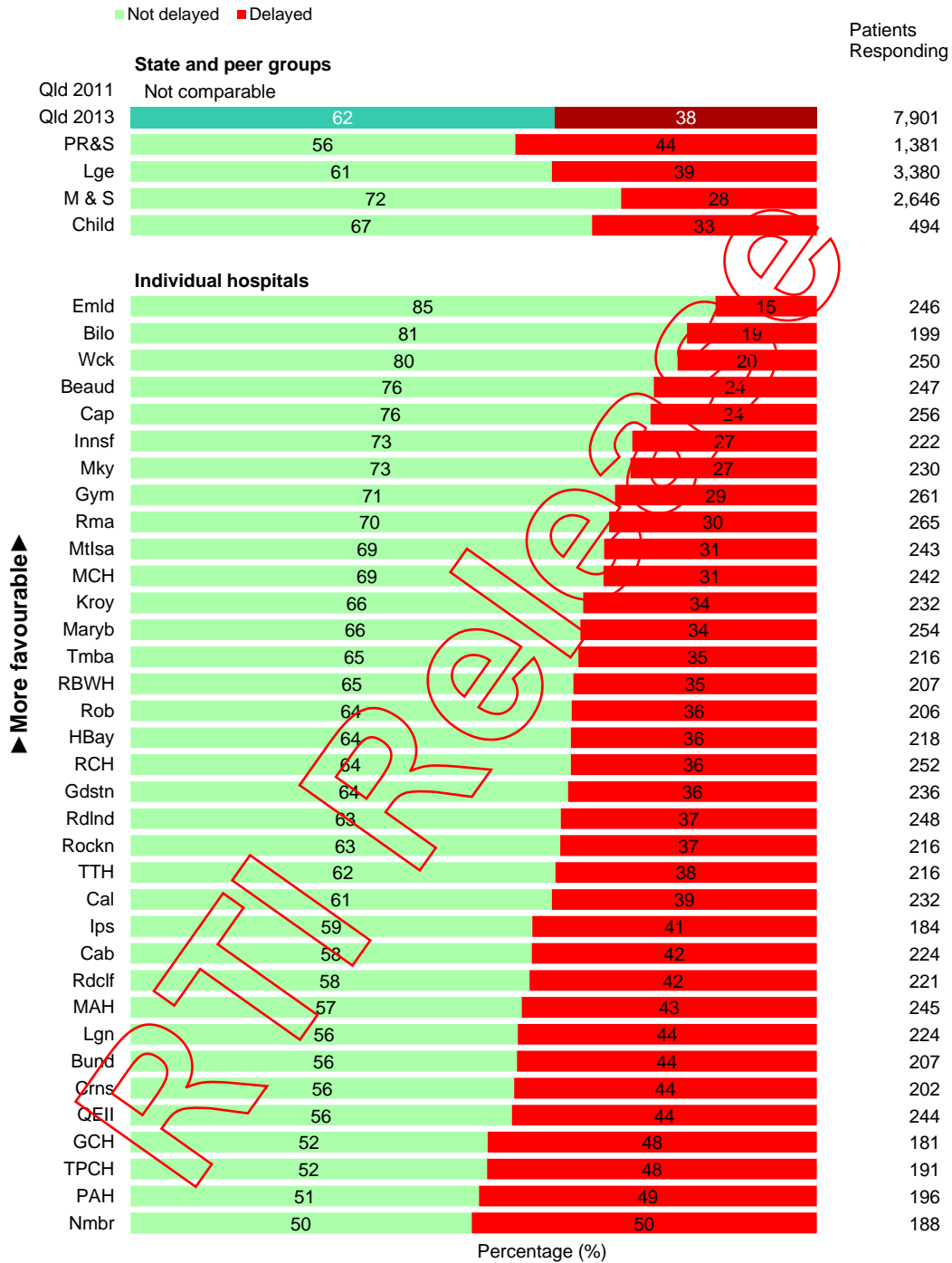
1. Patients delayed leaving Emergency Department
2. Reasons for delay in leaving Emergency Department

Note that the way these questions were asked differs from how they were asked in the 2011 survey and therefore no testing for significant differences between 2011 and 2013 has been undertaken for this topic. Similarly, the 2011 estimates are not included in the graphs as any comparison would be misleading.

Note also that questions in this topic were not asked of respondents who were admitted to a ward or transferred to another hospital.

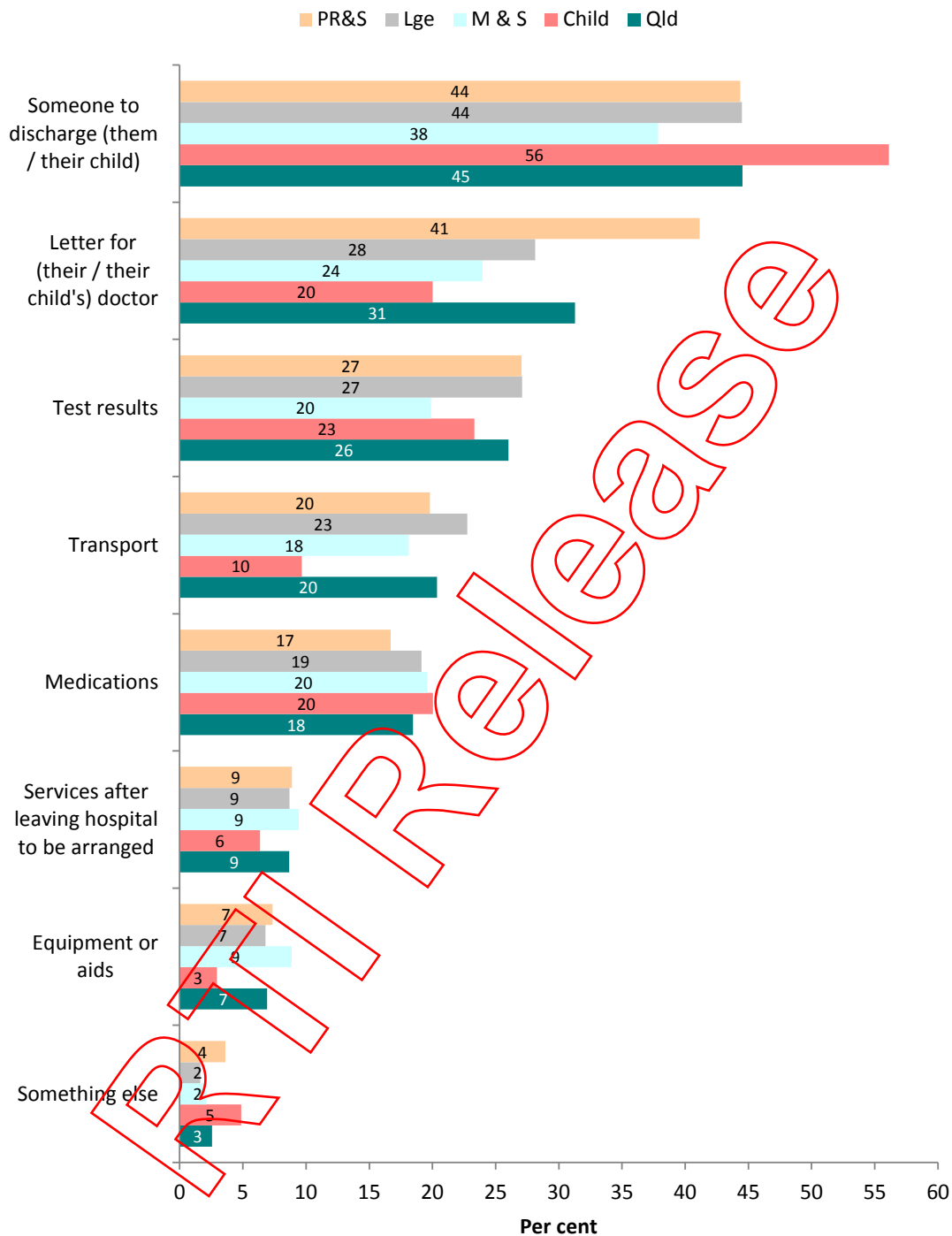
11.1 Patients delayed leaving Emergency Department

The questions in this topic were combined to indicate whether patients were delayed for any reason once (their / their child's) medical care was finished and (they / their child) were ready to leave the Emergency Department.



11.2 Reasons for delay in leaving Emergency Department

Patients and parents/guardians of patients who were delayed when leaving the Emergency Department gave the following reasons for their delay.



This graph shows the patients who reported each reason for delay, as a percentage of patients who reported any delay. Since each patient was able to report more than one reason for their delay, percentages may not add up to 100%.

12 Leaving the Emergency Department - Medications

Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, who were prescribed new medications, were asked the following questions:

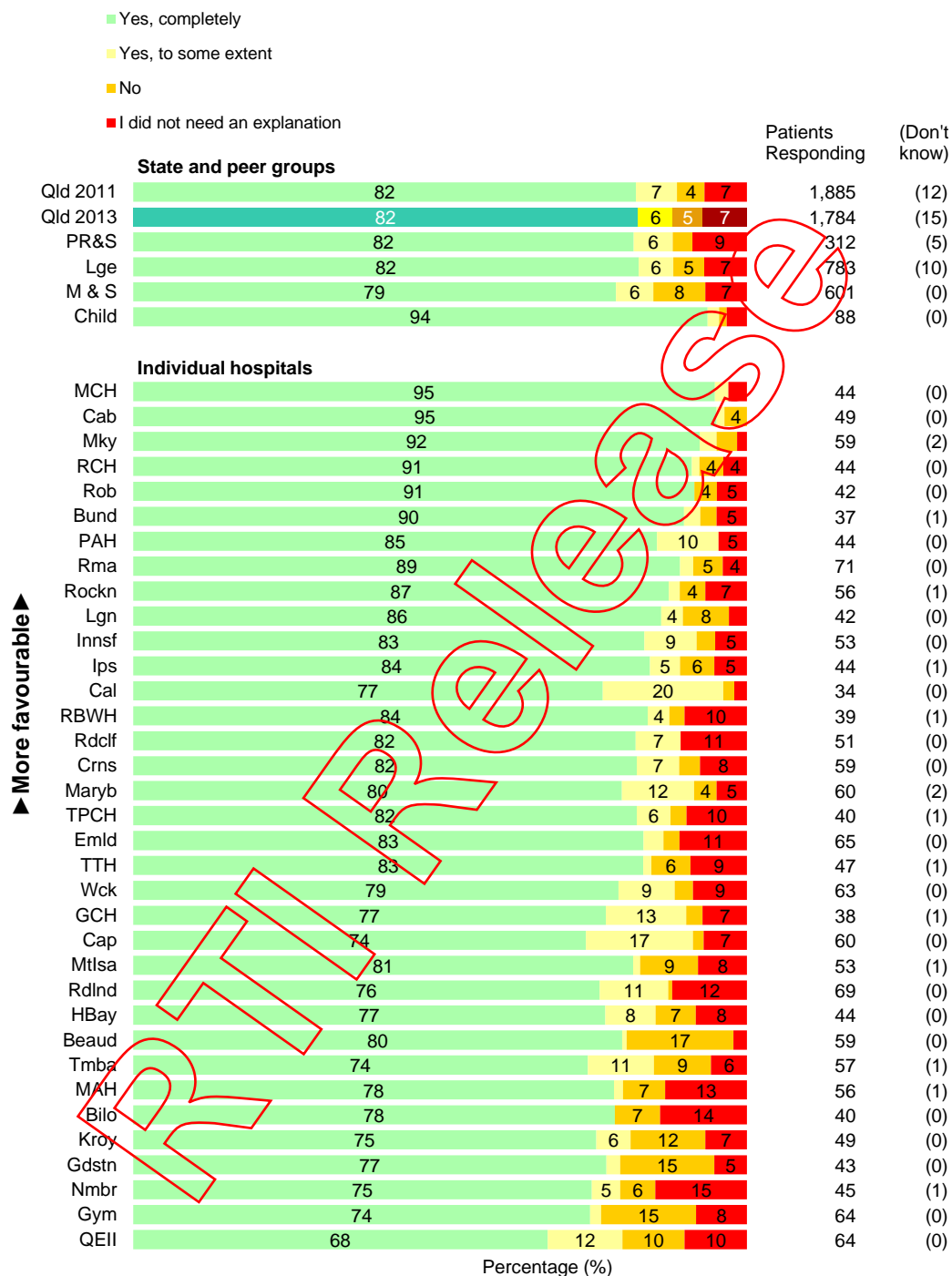
1. Did a member of staff explain to you how (you / your child) should take the new medications?
2. Did a member of staff explain the purpose of the medications (you were / your child was) to take at home in a way you could understand?
3. Did a member of staff tell you about medication side effects to watch for?

Note that questions in this topic were not asked of respondents who were admitted to a ward or transferred to another hospital.

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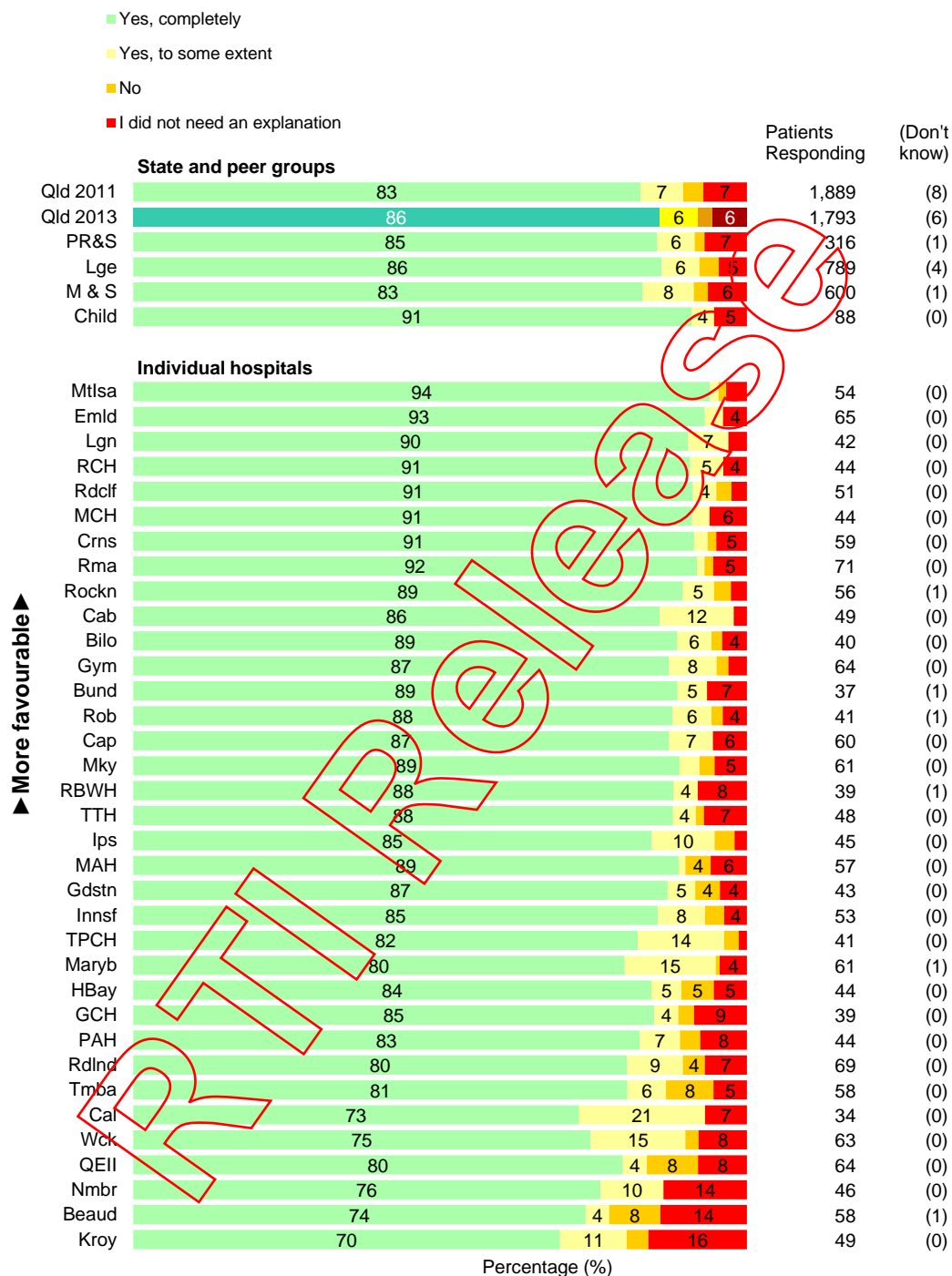
12.1 How to take new medications explained

Patients or parents/guardians of patients who were prescribed new medications were asked: *Did a member of staff explain to you how (you / your child) should take the new medications?*



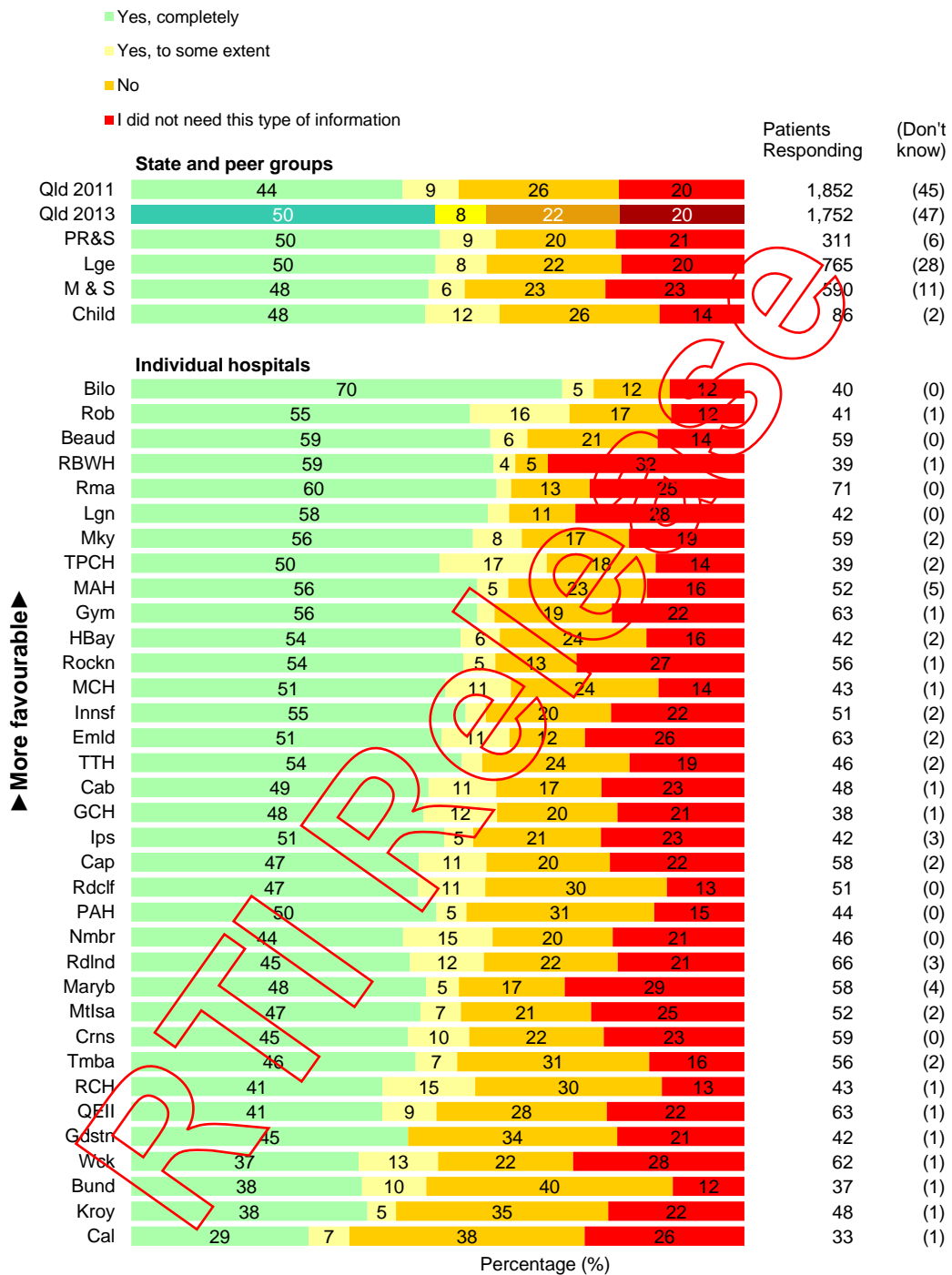
12.2 Purpose of new medications explained

Patients or parents/guardians of patients who were prescribed new medications were asked: *Did a member of staff explain the purpose of the medications (you were / your child was) to take at home in a way you could understand?*



12.3 Told about side effects of new medications

Patients or parents/guardians of patients who were prescribed new medications were asked: *Did a member of staff tell you about medication side effects to watch for?*



13 Leaving the Emergency Department - Information

Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, were asked the following questions:

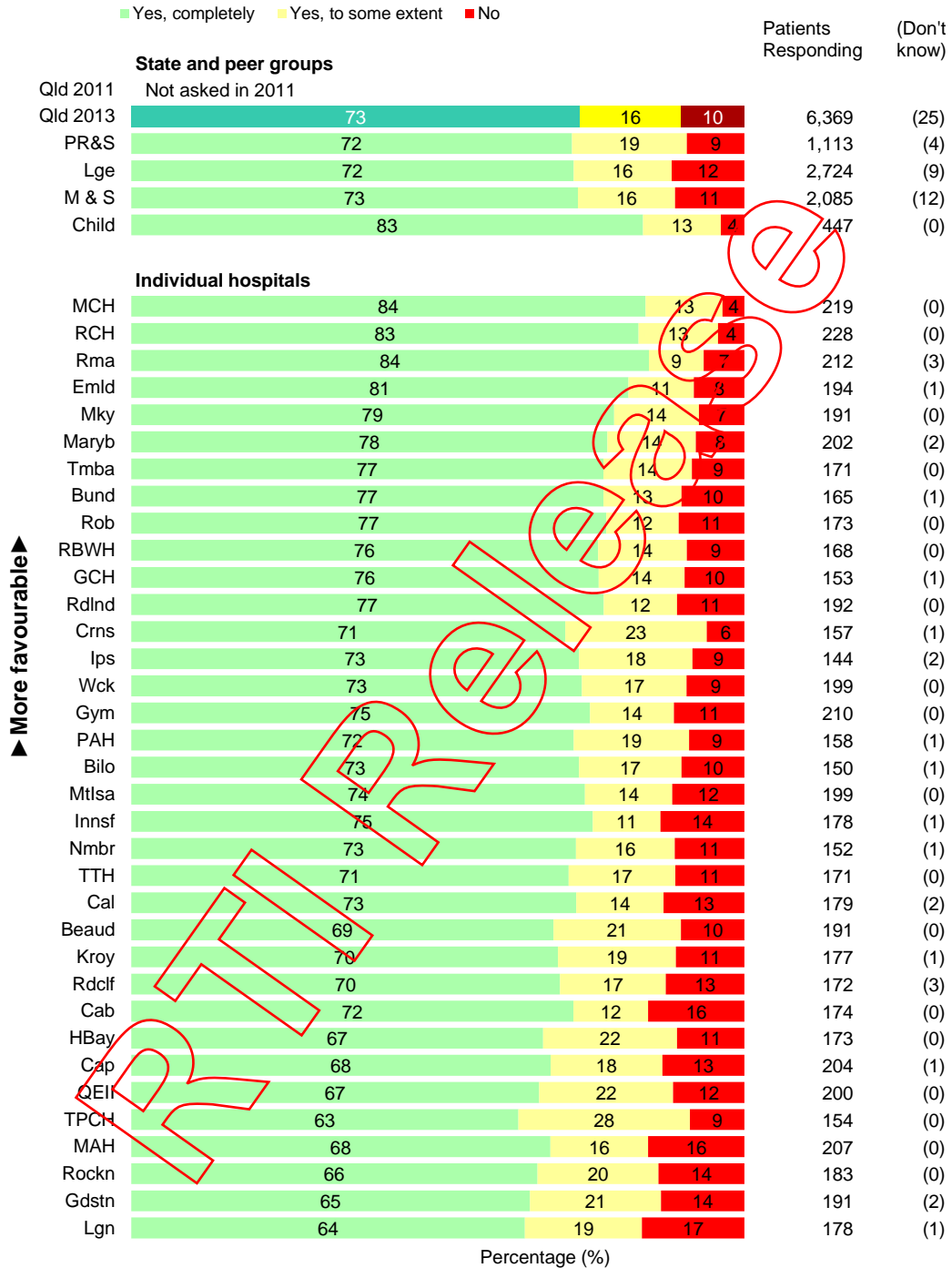
1. Were you given enough information about how to manage (your / your child's) care at home?
2. Before you left the Emergency Department, were you given any written or printed information about (your / your child's) condition or treatment (excluding letter for doctor)?
3. Did a member of staff tell you when (you / your child) could resume (your / their) usual activities?
4. Did a member of staff tell you about what danger signs regarding (your / your child's) illness or treatment to watch for after you went home?
5. Did hospital staff tell you who to contact if you were worried about (your / your child's) condition or treatment after you left the Emergency Department?

Note that questions in this topic were not asked of respondents who were admitted to a ward or transferred to another hospital.

RTI Release

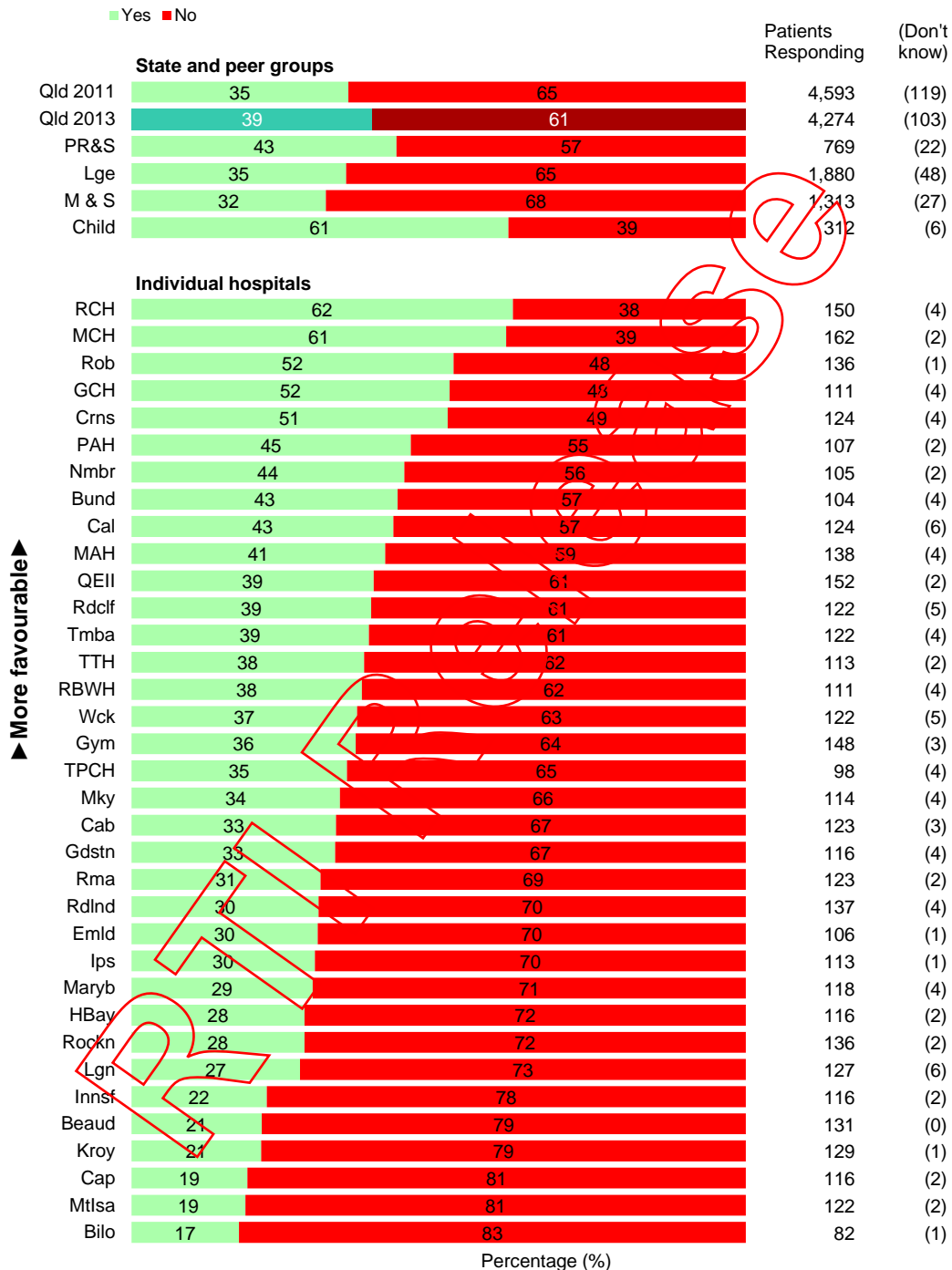
13.1 Given enough information about how to manage care at home

All patients or parents/guardians of patients were asked: *Were you given enough information about how to manage (your / your child's) care at home?*



13.2 Given written/printed information about condition or treatment

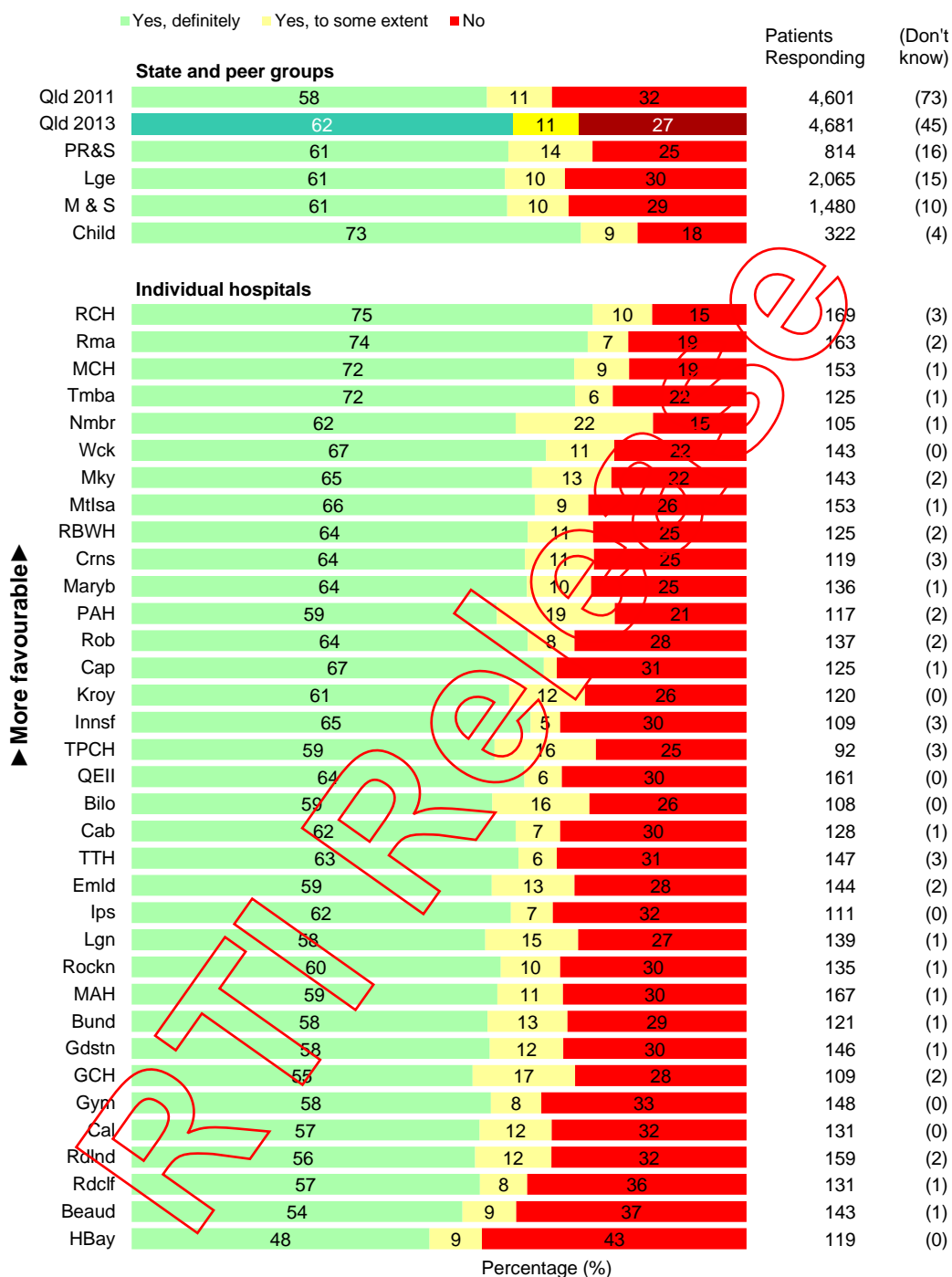
All patients or parents/guardians of patients were asked: *Before you left the Emergency Department, were you given any written or printed information about (your / your child's) condition or treatment (excluding letter for doctor)?*



The results for Queensland were significantly more favourable in **2013** than in **2011**.

13.3 Advised when to resume usual activities

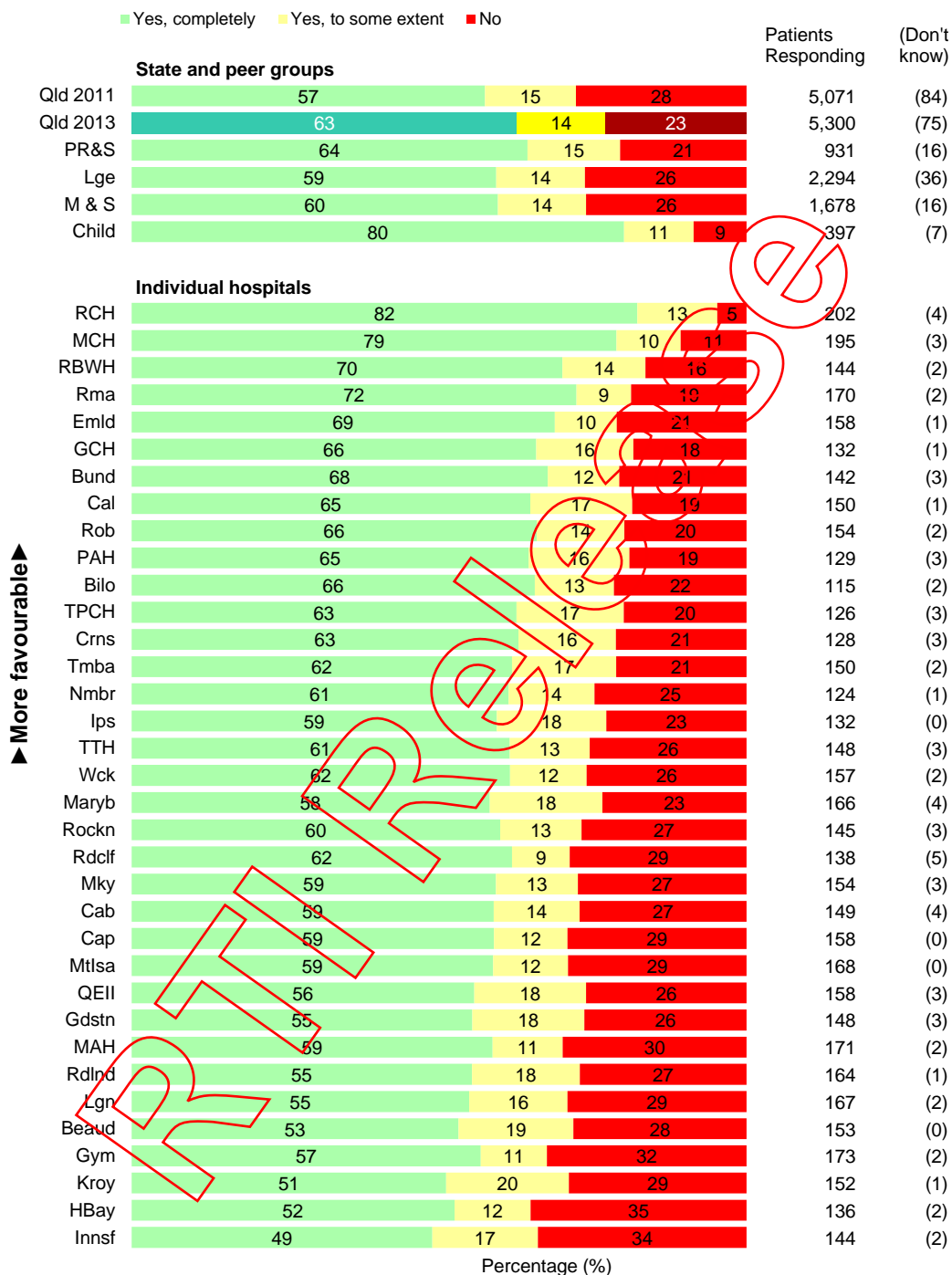
All patients or parents/guardians of patients were asked: *Did a member of staff tell you when (you / your child) could resume (your / their) usual activities?*



The results for Queensland were significantly more favourable in **2013** than in **2011**.

13.4 Advised about danger signs of illness/treatment

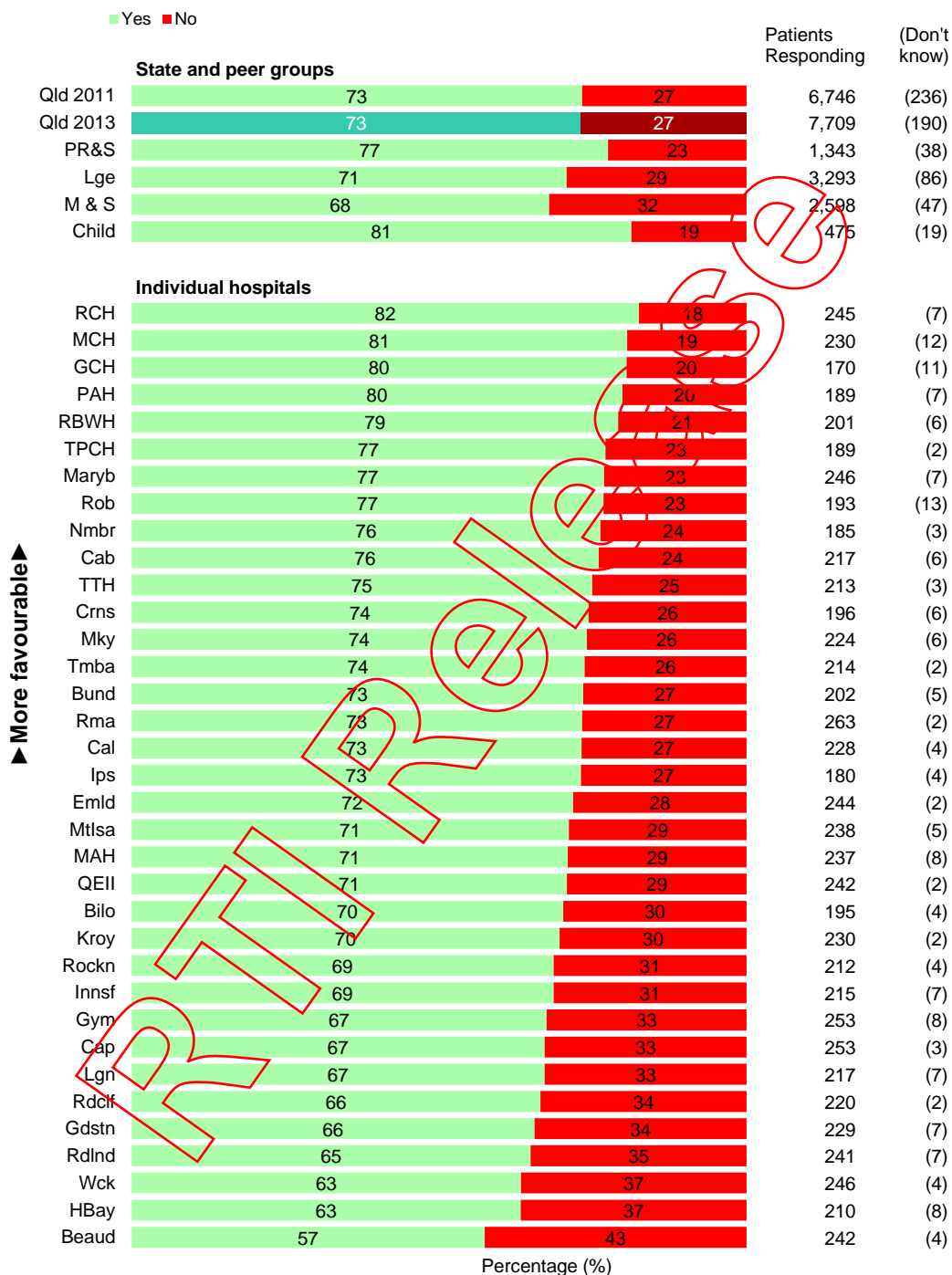
All patients or parents/guardians of patients were asked: *Did a member of staff tell you about what danger signs regarding (your / your child's) illness or treatment to watch for after you went home?*



The results for Queensland were significantly more favourable in 2013 than in 2011.

13.5 Advised who to contact if concerned about condition/treatment

All patients or parents/guardians of patients were asked: *Did hospital staff tell you who to contact if you were worried about (your / your child's) condition or treatment after you left the Emergency Department?*



14 Leaving the Emergency Department - Coordination of follow-up services

Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, were asked:

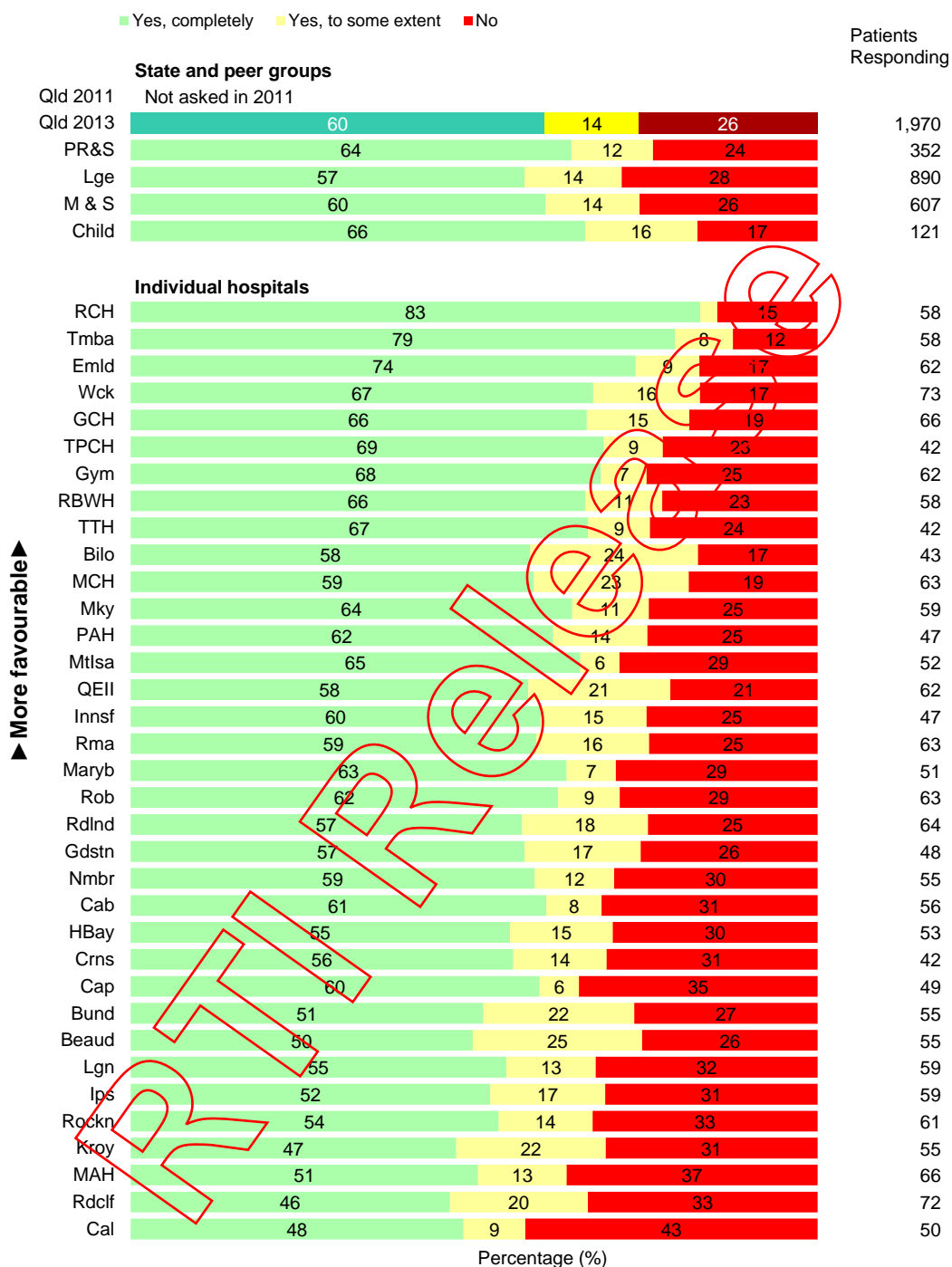
1. Were adequate arrangements made by the hospital for any services (you / your child) needed?

Note that the question in this topic was not asked of respondents who were admitted to a ward or transferred to another hospital.

RTI Release

14.1 Arrangements for services

All patients or parents/guardians of patients were asked: *Were adequate arrangements made by the hospital for any services (you / your child) needed?*



15 Leaving the Emergency Department - Destination

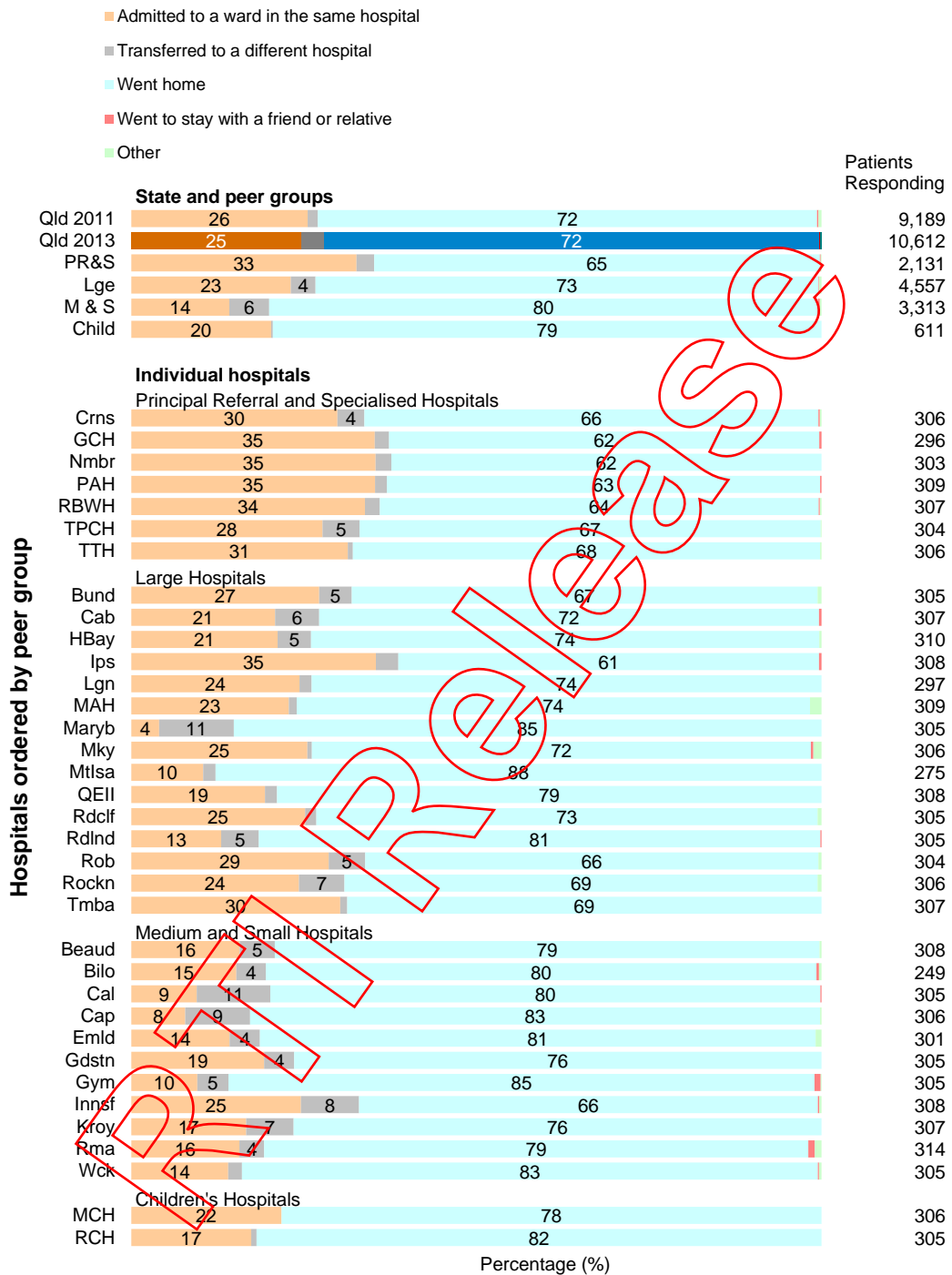
Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, were asked:

1. Where did (you / your child) go at the end of (your / your child's) time in the Emergency Department?

RTI Release

15.1 Destination after leaving the Emergency Department

All patients or parents/guardians of patients were asked: *Where did (you / your child) go at the end of (your / your child's) time in the Emergency Department?*



16 Complaints

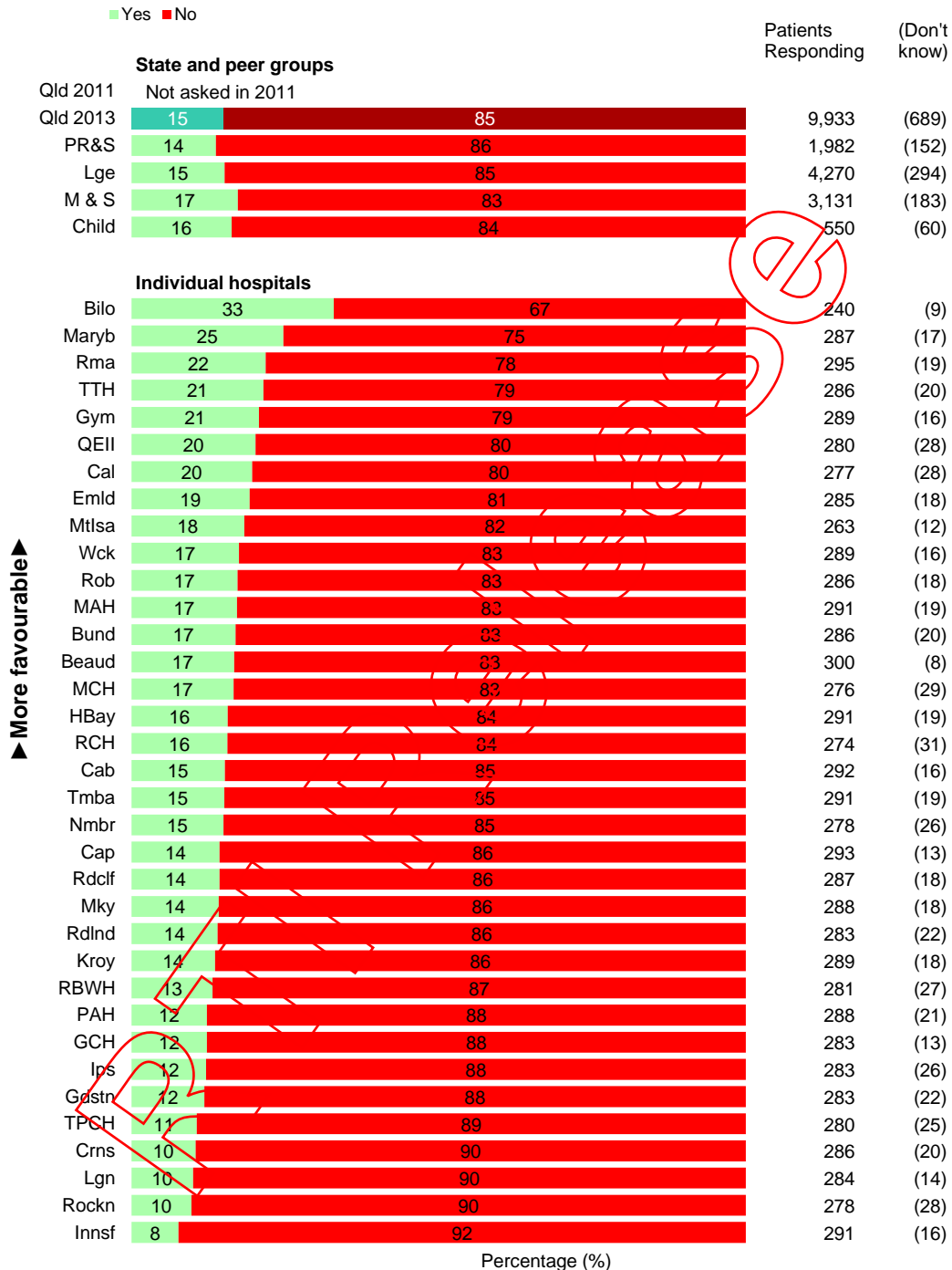
Patients aged 16 years or more, and parents/guardians of patients aged less than 16 years, were asked:

1. whether they saw or received any information in the Emergency Department about how to give feedback about the care they received.

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16.1 Information on how to provide feedback

All patients and parents/guardians of patients were asked whether they saw or received any information in the Emergency Department about how to give feedback about the care they received.



Appendix A: General information

A.1 Survey objectives

The objectives of the Emergency Department Patient Experience Survey 2013 were to:

- provide estimates of overall patient satisfaction at a statewide and health facility level
- provide estimates of patient satisfaction across components of Emergency Department care
- provide hospitals with data which can be used to measure and improve the delivery of Emergency Department services
- allow comparison with 2011 results.

A.2 Methodology

This section provides summary details of survey methodology, operational outcomes, and derivation of estimates. A more detailed description is available in the Survey Review.

A.2.1 Questionnaire design

The 2013 survey questionnaire was based on the 2011 questionnaire, which in turn was based on the Accident and Emergency (A&E) Department Question Bank 2009 (© Care Quality Commission, UK), with some questions added, modified or removed.

The survey instrument and additional questions were developed by Queensland Health in conjunction with the Government Statistician's office to meet the specific objectives of the survey and the mode of administration.

A small number of new questions from the national set of core, common patient experience questions recently endorsed by the National Health Information Standards and Statistics Committee were included.

A.2.2 Scope

Patients who visited Emergency Departments in Queensland's public hospitals between 1 May and 30 June 2013 were randomly selected on a monthly basis from the hospitals' Emergency Department information systems (EDIS and EDIS-Rural) to participate in the survey. In order for the patient to be considered in-scope, they needed to satisfy the following criteria:

- the patient attended an Emergency Department at one of the hospitals listed in Appendix B between 1 May 2013 and 30 June 2013
- the patient was discharged to their home or usual place of residence, or admitted to a hospital as an inpatient
- the patient was a resident of Australia.

Patients were excluded if it was determined they:

- did not wait for treatment
- left after treatment had commenced
- were admitted to a mental health unit or ward
- were discharged to a nursing home or institution

- were transferred to another health care facility, other than a hospital
- were deceased in the Emergency Department or subsequently
- presented for a mental health issue (except drug or alcohol related)
- presented with self-harm
- were in a known or suspected domestic violence situation
- had a miscarriage, stillbirth, live birth where the neonate subsequently died before discharge, intrauterine death, hydatidiform mole, or complications following miscarriage or termination
- had requested an interpreter in the hospital
- usually resided outside Australia
- had refused consent to be contacted to provide feedback
- had been contacted as part of the Press Ganey Survey conducted by the Mater Hospitals
- were 16 years of age or older if they were a patient in one of the Children's Hospitals
- were under 16 years of age if they were a patient in any of the other hospitals.

Responses for patients under the age of 16 were provided by their parent or guardian, or by the adult who accompanied them at the Emergency Department.

A.2.3 Sampling

The total sample size for each hospital was calculated to provide a 95% confidence interval achieving a margin of error up to 6 percentage points either side of a point prevalence estimate of 60%.

Two months of patient data were used with the sample drawn each month as the data became available. For health facilities where the expected number of in-scope patients was less than the number of patients needed to achieve the required level of precision or where the number of patients was only marginally higher, a census was attempted of all in-scope patients.

A total of 17,784 patients were selected to participate in the survey across the two months of interviewing. A breakdown of the response rate for each month is contained in Table 1.

A.2.4 Peer groups

The 35 public hospitals included in the survey were classified by Queensland Health into four mutually exclusive hospital peer groups:

- Principal Referral and Specialised Hospitals (PR & S - 7)
- Large Hospitals (Lge - 15)
- Medium and Small Hospitals (M & S - 11)
- Children's Hospitals (Child - 2).

For a list of hospitals in each peer group please refer to Appendix B.

A.2.5 Pre-approach letter and data collection

A pre-approach letter was sent to all selected patients informing them of their selection in the survey and advising them that they could expect to receive a phone call in the following weeks. The letter also provided:

- details of the Emergency Department admission for which they had been selected
- an assurance of confidentiality, as the information would be collected under the *Statistical Returns Act (1896)*
- contact phone numbers where they could receive further information about the survey or change their contact details.

A.2.6 Response rate

The response rate is the number of interviews that can be used in the analysis as a percentage of all possible interviews that could have been achieved, had every in-scope person responded. This means that patients who were considered out-of-scope on the frame (e.g. deceased or unconscious) were excluded from this calculation. For a more detailed description of the calculation of the response rates, please refer to the Survey Review.

A total of 10,626 interviews were achieved across the two months of interviewing, with an overall response rate of 60%.

Table 1: Breakdown of responses by month of visit

Month	May 2013		June 2013		Overall	
	Interviews Achieved	Response Rate (%)	Interviews Achieved	Response Rate (%)	Interviews Achieved	Response Rate (%)
Principal Referral and Specialised Hospitals	1,024	62	1,110	56	2,134	59
Large Hospitals	2,425	63	2,140	58	4,565	61
Medium and Small Hospitals	1,674	60	1,642	55	3,316	58
Children's Hospitals	329	77	282	65	611	71
All surveyed hospitals	5,452	62	5,174	57	10,626	60

The survey results have been calibrated to the Emergency Department population characteristics, potentially removing non-response bias that might be present in the raw data.

A.2.7 Sample characteristics and weighting

Weighting and benchmarking was applied to adjust for non-response in the sample and to standardise the results for each hospital.

Generalised regression weighting was used to calibrate the weight applied to each response during estimation to sum to the following marginal totals of patients:

- hospital
- age by hospital type (Children's Hospitals vs other hospitals)
- sex
- whether respondent had multiple contact numbers or not
- triage score (1 vs 2, 3, 4 or 5).

Estimates were then standardised by recalibrating the weights to standard population totals for hospital by age by sex. The standard population totals were calculated by apportioning the patient totals for each hospital according to the statewide proportion across all hospitals on the frame. To ensure comparability between 2011 and 2013 estimates, the 2011 data was restandardised to the 2013 population proportions. As a result, estimates for the 2011 survey may be slightly different from those published in the 2011 survey reports.

Table 2 shows the profile of respondents comparing the proportions of original responses to the proportions after the process of weighting and benchmarking had been applied. For full details on the weighting and benchmarking process, see the Survey Review.

Table 2: Sample characteristics

	State Public Hospitals	
	Original (%)	Benchmarked (%)
Triage category		
Triage score 1	0.3	0.8
Triage scores 2, 3, 4 and 5	99.7	99.2
Gender		
Male	49.4	50.4
Female	50.6	49.6
Age		
Under 2	1.6	2.4
2 - 15	4.1	5.1
16 - 35	31.8	35.7
36 - 55	29.2	26.1
56 and over	33.3	30.7

Percentages in this table may not add to 100% due to rounding.

A.3 Data analysis and presentation

A.3.1 Graphs

Results for each measure of patient experience or satisfaction are presented graphically in Sections 3 to 16. Apart from graph 11.2, they are set out as described below.

Layout

Top section

The top section of each graph shows the aggregated statewide results for 2011 and 2013, then the results for each of the peer groups.

Bottom section

The bottom section of the graph shows the results for each hospital ranked by their performance according to the most favourable categories, with the highest performing hospitals at the top. See Appendix D for more details of how hospitals were ranked for each graph.

In the case of neutral measures (those without a favourable-unfavourable interpretation), hospitals are ordered by peer group, and alphabetically within peer group.

Colour schemes

The coloured sections of the bars indicate the percentages of patients who gave various responses. They are interpreted according to the legend at the top of the graph.

The bar representing the 2013 Queensland results has been highlighted in each graph by using darker versions of the colours shown in the legend.

The rounded percentage is printed on each bar where the percentage is greater than 3.5. Smaller percentages are generally not printed to prevent them from obscuring the bars.

Extra information

The total number of patients who responded with one of the categories presented in the graph is indicated to the right of the bar. This number represents the base used to calculate the percentages.

In general, patients who gave responses not reported in the graph, such as 'Don't know', have been excluded from the calculation of the percentage in each bar, unless otherwise stated in the legend. For some measures, particularly those involving the recall of information provided by Emergency Department staff, the number of respondents who answered 'Don't know' or 'Didn't need' is also provided in brackets after the number of respondents. Categories excluded from graphs generally represent small numbers and percentages of patients.

Tables of results for the key satisfaction question are also provided in Appendix E.

A.3.2 Output interpretation

Rounding

Figures presented in this report are rounded to whole numbers. Rounding may cause the aggregation of categories to appear to sum to above or below 100%. Items that are less than 0.5% are rounded to zero. Items that are 99.5% or more are rounded to 100%.

Missing categories

Only the salient categories are presented in the graphs and tables. The categories that are typically not presented are 'Didn't need', 'Don't know / Can't remember' and 'Refused'. Where one or more of these categories represents a meaningful response they are included for reference.

A.3.3 Significance testing

Significance testing was performed for each measure between the 2011 and 2013 estimates for Queensland. Significant differences have been reported for each question under the corresponding graph. If a significant difference is not reported no significant difference was found.

Note that differences and rankings reported in Sections 1.2.1 and 1.2.2 of the Executive Summary are not the result of statistical significance testing and so those results may or may not represent statistically significant differences or trends.

A.3.4 Cautionary note

There are differences between the methodology used to collect and analyse data from Children's Hospitals and other hospitals. These differences include:

- the use of parents as proxy interviewees for child patients
- the use of the age category variable to standardise responses between hospitals, a variable mutually exclusively distributed between the two groups
- the exclusion of child patients who attended hospitals other than Children's Hospitals.

Consequently, caution should be taken when comparing results for Children's Hospitals and other hospitals.

Appendix B: Peer groups

The 35 public hospitals included in the survey were classified by Queensland Health into four mutually exclusive hospital peer groups:

- Principal Referral and Specialised Hospitals (7)
- Large Hospitals (15)
- Medium and Small Hospitals (11)
- Children's Hospitals (2).

The hospitals in each of the four peer groups are listed below.

Table 3: Hospitals in each peer group

PR & S	Principal Referral and Specialised Hospitals	First surveyed
Crns	Cairns Hospital	2011
GCH	Gold Coast Hospital	2011
Nmbr	Nambour General Hospital	2011
PAH	Princess Alexandra Hospital	2011
TPCH	The Prince Charles Hospital	2011
RBWH	The Royal Brisbane and Women's Hospital	2011
TTH	The Townsville Hospital	2011
Lge	Large Hospitals	First surveyed
Bund	Bundaberg Hospital	2011
Cab	Caboolture Hospital	2011
HBay	Hervey Bay Hospital	2011
Ips	Ipswich Hospital	2011
Lgn	Logan Hospital	2011
Mky	Mackay Base Hospital	2011
Maryb	Maryborough Hospital	2011
MAH	Mater Adult Hospital	2011
MtIsa	Mount Isa Hospital	2011
QEII	Queen Elizabeth II Jubilee Hospital	2011
Rdclf	Redcliffe Hospital	2011
RdInd	Redland Hospital	2011
Rob	Robina Hospital	2011
Rockn	Rockhampton Hospital	2011
Tmba	Toowoomba Health Service	2011
M & S	Medium and Small Hospitals	First surveyed
Beaud	Beaudesert Hospital	2011
Bilo	Biloela Hospital	2013
Cal	Caloundra Health Service	2011
Cap	Capricorn Coast Hospital and Health Service	2011
Emld	Emerald Hospital	2013
Gdstn	Gladstone Hospital	2011
Gym	Gympie Health Service	2011
Innsf	Innisfail Hospital	2011
Kroy	Kingaroy Hospital	2013
Rma	Roma Hospital	2013
Wck	Warwick Hospital	2013
Child	Children's Hospitals	First surveyed
MCH	Mater Children's Hospital	2011
RCH	Royal Children's Hospital	2011

Appendix C: Definitions of favourable and unfavourable

For tests of significant differences in this report, response categories for each relevant question were collapsed into two categories, indicating favourable and unfavourable responses from patients. The following table summarises how this was done for each question.

Table 4: Definitions of favourable and unfavourable responses

Section	Question topic	Favourable	Unfavourable	Excluded
3	Rating of care received (overall satisfaction)	Excellent Very good	Good Fair Poor Very poor	Don't know Refused
4.1	Main reason for attending Emergency Department ²	n.a.	n.a.	n.a.
4.2	Patient recall of triage process ²	Yes	Don't know No I did not discuss my condition with a triage nurse	Refused
4.3	Sufficient privacy at triage	Yes, definitely	Yes, to some extent No	Did not discuss condition Don't know Refused
4.4	Courtesy of Emergency Department receptionist	Excellent Very good	Good Fair Poor Very poor	Did not see receptionist Don't know Refused
5.1	Length of time waited before being examined by a doctor or nurse ²	n.a.	n.a.	n.a.
5.2	Told expected wait time to be examined	Yes Information shown on a (TV) screen	No	Don't know Refused
5.3	Told reason for wait to be examined ²	Yes Information shown on a (TV) screen	No	Don't know Refused
5.4	Patients ever worried they had been forgotten	No	Yes	Don't know Refused

² These questions were not considered for inclusion in the lists of top five areas of most and least favourable patient experience in the Executive summary.

Section	Question topic	Favourable	Unfavourable	Excluded
6.1	Condition and treatment explained in a way patients understood	Yes, completely	Yes, to some extent No	Did not need Don't know Refused
6.2	Doctors and nurses listened to patients	Yes, definitely	Yes, to some extent No	Don't know Refused
6.3	Doctor or nurse discussed patients' worries/fears about conditions or treatments	Yes, completely	Yes, to some extent No	Did not ask Don't know Refused
6.4	Confidence and trust in doctors and nurses	All of them Most of them	Only some of them None of them	Don't know Refused
6.5	Doctors and nurses talked in front of patients as if not there	No	Yes, to some extent Yes, definitely	Don't know Refused
7.1	Treated with respect and dignity	Yes, all of the time	Yes, some of the time No	Don't know Refused
7.2	Treated with kindness and understanding	Yes, all of the time	Yes, some of the time No	Don't know Refused
7.3	Amount of information about condition or treatment provided	The right amount Too much	Not enough I wasn't given any information about my condition or treatment	Don't know Refused
7.4	Understandable answers to patients' questions	Yes, definitely	Yes, to some extent No	Don't know Refused
7.5	Reasons patients did not ask questions about care and treatment ³	Did not have any questions Too unwell to ask any questions	Did not have an opportunity to ask questions There wasn't enough time to ask questions	Other reason Don't know Refused
7.6	Amount of information about condition or treatment provided to family, carer, someone else	The right amount Too much	Not enough	No family, carer or friends were involved They didn't want or need information I didn't want them to have any information Don't know Refused
7.7	Sufficient privacy during examination or treatment	Yes, definitely	Yes, to some extent No	Don't know Refused

³ These questions were not considered for inclusion in the lists of top five areas of most and least favourable patient experience in the Executive summary.

Section	Question topic	Favourable	Unfavourable	Excluded
7.8	Assistance from staff when needed	Yes, always A member of staff was with me all the time	Yes, sometimes No, I could not find a member of staff to help me	Did not need Don't know Refused
7.9	Conflicting information provided by staff	No	Yes, definitely Yes, to some extent	Don't know Refused
7.10	Involved as much as desired in decisions about care and treatment	Yes, definitely	Yes, to some extent No	Not well enough Don't know Refused
7.11	How many staff introduced themselves	All of them Some of them	Very few of them None of the staff introduced themselves	Don't know Refused
8.1	Reason for tests explained in understandable way	Yes, completely	Yes, to some extent No	Don't know Refused
8.2	Test results explained in understandable way	Yes, definitely	Yes, to some extent No	Don't know Refused
9.1	In pain ⁴	n.a.	n.a.	n.a.
9.2	Everything possible done to control pain	Yes, definitely	Yes, to some extent No	Don't know Refused
10.1	Cleanliness of Emergency Department	Very clean Fairly clean	Not very clean Not at all clean	Don't know Refused
10.2	Cleanliness of toilets	Very clean Fairly clean	Not very clean Not at all clean	Did not use Don't know Refused
10.3	Availability of food and drink	Yes	No	I was told not to eat or drink I didn't know if I was allowed to eat or drink I did not want anything to eat or drink Don't know Refused
10.4	Patients feeling bothered or threatened by patients/visitors	No	Yes, to some extent Yes, definitely	Don't know Refused
11.1	Patients delayed leaving Emergency Department	Not delayed	Delayed	Don't know Refused

⁴ These questions were not considered for inclusion in the lists of top five areas of most and least favourable patient experience in the Executive summary.

Section	Question topic	Favourable	Unfavourable	Excluded
11.2	Reasons for delay in leaving Emergency Department ⁵	n.a.	n.a.	n.a.
12.1	How to take new medications explained	Yes, completely	Yes, to some extent No I did not need an explanation	Don't know Refused
12.2	Purpose of new medications explained	Yes, completely	Yes, to some extent No I did not need an explanation	Don't know Refused
12.3	Told about side effects of new medications	Yes, completely	Yes, to some extent No I did not need this type of information	Don't know Refused
13.1	Given enough information about how to manage care at home	Yes, completely	Yes, to some extent No	I did not need this type of information Don't know Refused
13.2	Given written/printed information about condition or treatment	Yes	No	Did not need Don't know Refused
13.3	Advised when to resume usual activities	Yes, definitely	Yes, to some extent No	Did not need Don't know Refused
13.4	Advised about danger signs of illness/treatment	Yes, completely	Yes, to some extent No	Did not need Don't know Refused
13.5	Advised who to contact if concerned about condition/treatment	Yes	No	Don't know Refused
14.1	Arrangements for services	Yes, completely	Yes, to some extent No	Did not need Don't know Refused
15.1	Destination after leaving Emergency Department ⁵	n.a.	n.a.	n.a.
16.1	Information on how to provide feedback	Yes	No	Don't know Refused

⁵ These questions were not considered for inclusion in the lists of top five areas of most and least favourable patient experience in the Executive summary.

Appendix D: Methodology used to rank hospitals for each graph

In most of the graphs in this report, hospitals are ranked according to favourability of the responses, from highest to lowest. This ranking was performed by calculating a weighted sum of the percentage in each category for each hospital. Hospitals were then sorted by this weighted sum.

A function of multiple categories was used to try to ensure that all favourable categories were used in determining rank, with the most favourable categories given more weight.

The weights used for each graph are given in the table below.

Table 5: Weights used in sorting hospitals for each graph

Section	Graph Title	Weights	Categories
3	Rating of care received (overall satisfaction)	100 80 60 40 20 0	Excellent Very good Good Fair Poor Very poor
4.1	Main reason for attending Emergency Department	n.a.	n.a.
4.2	Patient recall of triage process	100 50 25 0	Yes Don't know No I did not discuss my condition with a triage nurse
4.3	Sufficient privacy at triage	100 50 0	Yes, definitely Yes, to some extent No
4.4	Courtesy of Emergency Department receptionist	100 80 60 40 20 0	Excellent Very good Good Fair Poor Very poor
5.1	Length of time waited before being examined by a doctor or nurse	100 80 60 40 20 0	10 minutes or less 11 - 30 minutes 31 - 60 minutes 61 minutes - 2 hours More than 2 hours - 4 hours More than 4 hours
5.2	Told expected wait time to be examined	100 50 0	Yes Information shown on a (TV) screen No

Section	Graph Title	Weights	Categories
5.3	Told reason for wait to be examined	100 50 0	Yes Information shown on a (TV) screen No
5.4	Patients ever worried they had been forgotten	100 0	No Yes
6.1	Condition and treatment explained in a way patients understood	100 50 0	Yes, completely Yes, to some extent No
6.2	Doctors and nurses listened to patients	100 50 0	Yes, definitely Yes, to some extent No
6.3	Doctor or nurse discussed patients' worries/fears about conditions or treatments	100 50 0	Yes, completely Yes, to some extent No
6.4	Confidence and trust in doctors and nurses	100 75 25 0	All of them Most of them Only some of them None of them
6.5	Doctors and nurses talked in front of patients as if not there	100 50 0	No Yes, to some extent Yes, definitely
7.1	Treated with respect and dignity	100 50 0	Yes, all of the time Yes, some of the time No
7.2	Treated with kindness and understanding	100 50 0	Yes, all of the time Yes, some of the time No
7.3	Amount of information about condition or treatment provided	100 66.7 33.3 0	The right amount Too much Not enough I was not given any information about my condition or treatment
7.4	Understandable answers to patients' questions	100 50 0	Yes, definitely Yes, to some extent No
7.5	Reasons patients did not ask questions about care and treatment	100 100 0 0	Did not have any questions Too unwell to ask any questions Did not have an opportunity to ask questions There wasn't enough time to ask questions
7.6	Amount of information about condition or treatment provided to family, carer, someone else	100 50 0	The right amount Too much Not enough
7.7	Sufficient privacy during examination or treatment	100 50 0	Yes, definitely Yes, to some extent No
7.8	Assistance from staff when needed	100 50 0	Yes, always / A member of staff was with me all the time Yes, sometimes No, I could not find a member of staff to help me

Section	Graph Title	Weights	Categories
7.9	Conflicting information provided by staff	100 50 0	No Yes, to some extent Yes, definitely
7.10	Involved as much as desired in decisions about care and treatment	100 50 0	Yes, definitely Yes, to some extent No
7.11	How many staff introduced themselves	100 75 25 0	All of them Some of them Very few of them None of the staff introduced themselves
8.1	Reason for tests explained in understandable way	100 50 0	Yes, completely Yes, to some extent No
8.2	Test results explained in understandable way	100 50 0	Yes, definitely Yes, to some extent No
9.1	In pain	n.a.	n.a.
9.2	Everything possible done to control pain	100 50 0	Yes, definitely Yes, to some extent No
10.1	Cleanliness of Emergency Department	100 75 25 0	Very clean Fairly clean Not very clean Not at all clean
10.2	Cleanliness of toilets	100 75 25 0	Very clean Fairly clean Not very clean Not at all clean
10.3	Availability of food and drink	100 0	Yes No
10.4	Patients feeling bothered or threatened by patients/visitors	100 50 0	No Yes, to some extent Yes, definitely
11.1	Patients delayed leaving Emergency Department	100 0	Not delayed Delayed
11.2	Reasons for delay in leaving Emergency Department	n.a.	n.a.
12.1	How to take new medications explained	100 50 0 0	Yes, completely Yes, to some extent No I did not need an explanation

Section	Graph Title	Weights	Categories
12.2	Purpose of new medications explained	100 50 0 0	Yes, completely Yes, to some extent No I did not need an explanation
12.3	Told about side effects of new medications	100 50 0 0	Yes, completely Yes, to some extent No I did not need this type of information
13.1	Given enough information about how to manage care at home	100 50 0	Yes, completely Yes, to some extent No
13.2	Given written/printed information about condition or treatment	100 0	Yes No
13.3	Advised when to resume usual activities	100 50 0	Yes, definitely Yes, to some extent No
13.4	Advised about danger signs of illness/treatment	100 50 0	Yes, completely Yes, to some extent No
13.5	Advised who to contact if concerned about condition/treatment	100 0	Yes No
14.1	Arrangements for services	100 50 0	Yes, completely Yes, to some extent No
15.1	Destination after leaving Emergency Department	n.a.	n.a.
16.1	Information on how to provide feedback	100 0	Yes No

Appendix E: Hospital results

The tables within this section outline a few key details for each hospital involved in the survey. These include the number of interviews achieved, the response rate and responses to the overall rating of care question: *'Overall, how would you rate the care you (child) received in the Emergency Department?'* for 2011 and 2013. Analysis has been performed on the latter results to present statistically significant differences at the state and peer level. All analysis has been performed on the unrounded estimates and hospitals have been ordered alphabetically within each peer group.

In this appendix significance testing was undertaken on the estimated proportions at the 95% significance level adjusted for multiple comparisons. Testing at the 95% level of confidence means any differences reported are either true differences, or the product of randomly extreme data that has less than a 5% chance of happening. For example, at the 95% significance level, we would expect 1 in 20 tests to incorrectly show a significant difference due to chance alone, adjusted for multiple comparisons.

Significance testing was performed on non-overlapping groups. Testing between the hospital and the peer group or state was performed excluding the hospital from the peer group or state results. Non-overlapping groups fulfil the statistical assumption of independence. Testing results of non-overlapping groups may also improve the likelihood for the detection of differences between the results tested.

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The following notation has been used for annotating comparisons and items of note in the tables below and throughout this section. Note that symbols have only been applied to the 2013 results as these are the focus of this report.

Table 6: Key to symbols in tables of estimates

Symbol	Interpretation
#	Statistically significant difference between hospital and state results
\$	Statistically significant difference between hospital and peer group results
~	Statistically significant difference between 2013 and 2011 results
^	Highest result in peer group
v	Lowest result in peer group
*	Confidence interval width between 10 and 30 percentage points
**	Confidence interval width greater than 30 percentage points

RTI please

Table 7: Key results for Principal Referral and Specialised Hospitals

Hospital Name	Interviews Achieved	Response Rate (%)	Rating of care received (overall satisfaction) 2013			Rating of care received (overall satisfaction) 2011		
			Excellent / Very good (%)	Good / Fair (%)	Poor / Very poor (%)	Excellent / Very good (%)	Good / Fair (%)	Poor / Very poor (%)
State public hospitals	10,626	60	74	23	4	77	19	3
Principal Referral and Specialised Hospitals	2,134	59	75	22	3	78	18	3
TPCH	305	63	76	21	3	79	18	3
PAH	309	59	80*	17# _v	3	78	19	3
Nmbr	304	59	77*	21*	2	82	17	0
GCH	296	57	69 _v *	26 _v ^*	5^	78	15	7
TTH	306	60	72*	25*	4	79	18	3
RBWH	308	61	81^*	18*	2 _v	77	21	2
Crns	306	54	74*	24*	2	76	21	3

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Table 8: Key results for Large Hospitals

Hospital Name	Interviews Achieved	Response Rate (%)	Rating of care received (overall satisfaction) 2013			Rating of care received (overall satisfaction) 2011		
			Excellent / Very good (%)	Good / Fair (%)	Poor / Very poor (%)	Excellent / Very good (%)	Good / Fair (%)	Poor / Very poor (%)
State public hospitals	10,626	60	74	23	4	77	19	3
Large Hospitals	4,565	61	72	25	4	77	20	3
MAH	310	61	75*	22*	3	82	17	2
Ips	309	66	68*	29*	2	71	25	4
Rdclf	305	61	68*	25*	7^	76	22	2
QEII	308	61	74	23	3	73	23	5
RdInd	305	60	74	22	4	78	18	3
Lgn	298	61	64# ^{\$-v*}	31# ^{^*}	5	75	22	3
Cab	308	63	71*	24*	5	77	19	5
Bund	306	59	75*	23*	2 _v	80	17	3
HBay	310	63	71*	25*	4	76	20	4
Maryb	305	62	79\$^	18 _v	3	77	20	3
Tmba	310	62	70*	26*	4	77	20	2
Rockn	306	59	67*	28*	5	77	20	3
Mky	306	61	77*	21*	2	78	20	2
MtIsa	275	50	67*	27*	5	75	21	4
Rob	304	60	78*	19*	3	81	16	3

Table 9: Key results for Medium and Small Hospitals

Hospital Name	Interviews Achieved	Response Rate (%)	Rating of care received (overall satisfaction) 2013			Rating of care received (overall satisfaction) 2011		
			Excellent / Very good (%)	Good / Fair (%)	Poor / Very poor (%)	Excellent / Very good (%)	Good / Fair (%)	Poor / Very poor (%)
State public hospitals	10,626	60	74	23	4	77	19	3
Medium and Small Hospitals	3,316	58	71	25	4	76	21	4
Beaud	308	60	70*	25*	5	74	21	5
Cal	305	64	76	22	2	75	23	3
Gym	306	62	73*	23*	3	75	22	3
Kroy	307	52	64#*	29*	7#^	n.a.	n.a.	n.a.
Wck	305	56	69*	27*	4	n.a.	n.a.	n.a.
Rma	314	57	79\$*	18 _v *	3	n.a.	n.a.	n.a.
Bilo	249	54	67*	30^*	3	n.a.	n.a.	n.a.
EmlD	303	61	77*	19*	4	n.a.	n.a.	n.a.
Gdstn	305	58	64#~*	29#~*	6	77	18	5
Cap	306	57	70~*	24*	7	81	15	4
Innsf	308	56	67*	27*	5	72	25	4

Table 10: Key results for Children's Hospitals

Hospital Name	Interviews Achieved	Response Rate (%)	Rating of care received (overall satisfaction) 2013			Rating of care received (overall satisfaction) 2011		
			Excellent / Very good (%)	Good / Fair (%)	Poor / Very poor (%)	Excellent / Very good (%)	Good / Fair (%)	Poor / Very poor (%)
State public hospitals	10,626	60	74	23	4	77	19	3
Children's Hospitals	611	71	83	15	2	82	16	2
MCH	306	67	81 _v *	16 [^]	3 [^]	80	16	4
RCH	305	75	88 ^{#^}	11 ^{#_v}	1 _v	84	16	1

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Appendix F: Adult Questionnaire

Emergency Department Patient Experience Survey 2013

Hello: Hello, this is ... calling from the Government Statistician's office. We are conducting an interview about perceptions of public hospitals on behalf of the Department of Health.

Intro1: Could I please speak to [respondent's name]?

- | | | |
|---|-------------------------------|------------|
| 1 | Speaking to respondent | |
| 2 | Contact will get respondent | |
| 3 | No – Not here right now | End survey |
| 4 | No – Away for extended period | End survey |
| 5 | Refused | End survey |
-

Intro2: We are interviewing people who were patients at Public Hospital Emergency Departments recently about their perceptions of the care they received.

You may remember receiving a letter to tell you we would call you regarding your experiences while you were at the Emergency Department at [hospital] on [date].

The information you provide will help the Department of Health improve public hospital services. The interview will only take around 12 minutes of your time. Your responses are strictly confidential and no identifying information can be released to the Department of Health or any other body.

Can we start now?

- | | | |
|---|------------------------|------------|
| 1 | Yes | Go to Q1 |
| 2 | No – arrange call back | End survey |
| 3 | Refused | End survey |
-

GH1: In general, would you say your health is -

- | | |
|----|------------|
| 1 | Excellent |
| 2 | Very good |
| 3 | Good |
| 4 | Fair |
| 5 | Poor |
| 98 | Don't know |
| 99 | Refused |
-

Q1: Before we begin, can I just check that you were conscious for all or most of your time in the Emergency Department?

- | | |
|----|--|
| 1 | Yes |
| 2 | Yes – conscious but can't remember details |
| 3 | No |
| 98 | Don't know |
| 99 | Refused |
-

If Q1 = 1 go to Q3Int; Otherwise End survey

Q3Int: Some calls are monitored by my supervisor for training and quality purposes.

Q3: At the end of your time in the Emergency Department, were you - ?

- 1 Admitted to a ward in the same hospital**
- 2 Transferred to a different hospital**
- 3 Did you go home**
- 4 Go to stay with a friend or relative
- 5 Other (specify)
- 98 Don't know
- 99 Refused

If Q3 = 1 or 2 go to Text1; Otherwise go to Text2

Text1: The Department of Health undertakes a range of patient experience surveys. This survey focuses on the care of patients in the Emergency Department.

The majority of questions will be about JUST your stay while in the Emergency Department.

However, I will provide an opportunity for you at the end of the survey, to give your feedback on the care you received in the ward.

Text2: Now I'd like to ask you about your overall impressions of your visit to the Emergency Department.

QS3: Overall, how would you rate the care you received in the Emergency Department? Would you say it was -

- 1 Excellent**
 - 2 Very good**
 - 3 Good**
 - 4 Fair**
 - 5 Poor**
 - 6 Very poor**
 - 98 Don't know
 - 99 Refused
-

QS2: Overall, did you feel you were treated with respect and dignity while you were in the Emergency Department? The options are –

- 1 Yes, all of the time**
 - 2 Yes, some of the time**
 - 3 No**
 - 98 Don't know
 - 99 Refused
-

QS7: Overall, were you treated with kindness and understanding while you were in the Emergency Department? Would you say - ?

- 1 Yes, all of the time**
 - 2 Yes, some of the time**
 - 3 No**
 - 98 Don't Know
 - 99 Refused
-

QS5: Was the MAIN reason that you went to the Emergency Department because....?
(READ OUT. ONE ANSWER ONLY)

- 1 You were told to go by the 13HEALTH hotline service
- 2 You were told to go by another health professional
- 3 You were taken to the Emergency Department by the Ambulance
- 4 It was free
- 5 Your doctor was not available
- 6 You were not aware of any other service available at the time
- 7 You wanted a second opinion
- 8 You decided that you needed to go to an Emergency Department
- 9 Somebody else decided that you needed to go to an Emergency Department
- 10 Or some other reason
- 98 Don't know
- 99 Refused

Q9a: The triage process is where a nurse assesses the patient's condition and prioritises them according to how urgent they are.
Do you remember taking part in the triage process?

- 1 Yes
- 2 No
- 3 I did not discuss my condition with a triage nurse
- 98 Don't know
- 99 Refused

If Q9a = 1 go to Q9b; Otherwise go to Q10

Q9b: Were you given enough privacy when discussing your condition with the triage nurse?
Would you say ...

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No
- 4 I did not discuss my condition with a triage nurse
- 98 Don't know
- 99 Refused

Q10: How would you rate the courtesy of the Emergency Department RECEPTIONIST?
Would you say it was -

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor
- 6 Very poor
- 7 I did not see a receptionist
- 98 Don't know
- 99 Refused

Q14Int Next are some questions about waiting while in the Emergency Department.

Q14: From the time you first arrived at the Emergency Department, how long did you wait BEFORE BEING EXAMINED by a doctor or nurse?
(READ OUT ONLY IF NECESSARY.)

- 1 Did not have to wait
 - 2 Up to 10 minutes
 - 3 11 - 30 minutes
 - 4 31 - 60 minutes
 - 5 61 minutes - 2 hours
 - 6 More than 2 hours - 3 hours
 - 7 More than 3 hours - 4 hours
 - 8 More than 4 hours
 - 98 Don't know
 - 99 Refused
-

If Q14 = 1 go to Q22; Otherwise go to Q15

Q15: Were you told how long you might have to WAIT TO BE EXAMINED?

- 1 Yes
 - 2 Information shown on a (TV) screen
 - 3 No
 - 98 Don't know
 - 99 Refused
-

Q17: Were you told WHY YOU HAD TO WAIT to be examined?

- 1 Yes
 - 2 Information shown on a (TV) screen
 - 3 No
 - 98 Don't know/can't remember
 - 99 Refused
-

Q22: At any point, did you ever feel worried that staff in the Emergency Department had forgotten about you?

- 1 Yes
 - 2 No
 - 98 Don't know
 - 99 Refused
-

Q25Int: The next group of questions is about the doctors and nurses.

Q25: While you were in the Emergency Department, did a doctor or nurse explain your condition and treatment in a way you could understand? Would you say -

- 1 **Yes, completely**
 - 2 **Yes, to some extent**
 - 3 **No**
 - 4 **I did not need an explanation**
 - 98 Don't know
 - 99 Refused
-

Q26: Did the doctors and nurses listen to what you had to say? Would you say -

- 1 **Yes, definitely**
 - 2 **Yes, to some extent**
 - 3 **No**
 - 98 Don't know
 - 99 Refused
-

Q27: Did you have any worries or fears about your condition or treatment?

- 1 **Yes**
 - 2 **No**
 - 98 Don't know
 - 99 Refused
-

If Q27 = 1 go to Q28; Otherwise go to Q29

Q28: Did a doctor or nurse discuss these worries or fears with you? Would you say -

- 1 **Yes, completely**
 - 2 **Yes, to some extent**
 - 3 **No**
 - 4 **I did not attempt to discuss any worries/fears with doctor/nurse**
 - 98 Don't know
 - 99 Refused
-

Q29: Did you have confidence and trust in the doctors and nurses examining and treating you? Would you say you had confidence and trust in -

- 1 **All of them**
 - 2 **Most of them**
 - 3 **Only some of them**
 - 4 **None of them**
 - 98 Don't know
 - 99 Refused
-

Q31: Sometimes doctors and nurses might talk in front of a patient as if they weren't there. Did this happen to you? Would you say -

- 1 **Yes, definitely**
 - 2 **Yes, to some extent**
 - 3 **No**
 - 98 Don't know
 - 99 Refused
-

Q33Int: Now I have some questions about your care and treatment. Again, this just relates to the Emergency Dept.

Q33: While you were in the Emergency Department, how much information about your condition or treatment was given to you? Would you say -

- 1 **Not enough**
 - 2 **The right amount**
 - 3 **Too much**
 - 4 **I wasn't given any information about my condition or treatment**
 - 98 Don't know
 - 99 Refused
-

Q34: Did you ask questions about your care and treatment?

- 1 Yes
- 2 No
- 98 Don't know
- 99 Refused

If Q34 = 1 go to Q35; If Q34 = 2 go to Q36; Otherwise go to NAT3

Q35: Did you get answers that you could understand? Would you say -

- 1 Yes, definitely**
- 2 Yes, to some extent**
- 3 No**
- 98 Don't know
- 99 Refused

Go to NAT3

Q36: Was this because you didn't have any questions, or for some other reason?

- 1 Did not have any questions
- 2 Too unwell to ask any questions
- 3 Did not have an opportunity to ask questions
- 4 There wasn't enough time to ask questions
- 5 Other reason (please specify)
- 98 Don't know
- 99 Refused

This question is not included in the Child questionnaire.

NAT3: How much information about your condition or treatment was given to your family, carer or someone close to you? Would you say -

- 1 Not enough**
- 2 The right amount**
- 3 Too much**
- 4 No family, carer or friends were involved**
- 5 They didn't want or need information**
- 6 I didn't want them to have any information**
- 98 Don't know
- 99 Refused

Q38: Were you given enough privacy WHEN BEING EXAMINED OR TREATED?
Would you say -

- 1 Yes, definitely**
 - 2 Yes, to some extent**
 - 3 No**
 - 98 Don't know
 - 99 Refused
-

Q39: If YOU needed attention were you able to get a member of staff to help you?
Would you say -

- 1 **Yes, always**
- 2 **Yes, sometimes**
- 3 **No, I could not find a member of staff to help me**
- 4 **A member of staff was with me all the time**
- 5 **I did not need attention**
- 98 Don't know
- 99 Refused

Q40: Sometimes in a hospital, a member of staff may say one thing and another may say something quite different. Did this happen to you in the Emergency Department?
Would you say -

- 1 **Yes, definitely**
- 2 **Yes, to some extent**
- 3 **No**
- 98 Don't know
- 99 Refused

Q41: Were you involved as much as you wanted to be in decisions about your care and treatment? Would you say -

- 1 **Yes, definitely**
- 2 **Yes, to some extent**
- 3 **No**
- 4 **I was not well enough to be involved in decisions about my care**
- 98 Don't know
- 99 Refused

Q42: How many of the staff treating and assessing you introduced themselves? Was it -

- 1 **All of them**
- 2 **Some of them**
- 3 **Very few of them**
- 4 **None of the staff introduced themselves**
- 98 Don't know
- 99 Refused

Q43Int: The next few questions are about tests you may have had. This is still just in relation to your care in the Emergency Dept.

Q43: Did you have any tests, such as x-rays, scans or blood tests, when you visited the Emergency Department?

- 1 Yes
- 2 No
- 98 Don't know
- 99 Refused

If Q43 = 1 go to Q44; Otherwise go to Q47Int

Q44: Did a member of staff explain WHY YOU NEEDED these tests in a way you could understand? Would you say -

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No
- 98 Don't know
- 99 Refused

Q45: Before you left the Emergency Department, were you TOLD the results of ANY of your tests?

- 1 Yes
- 2 No
- 3 ONLY given results in a sealed envelope for doctor
- 98 Don't know
- 99 Refused

If Q45 = 1 go to Q46; Otherwise go to Q47Int

Q46: Did a member of staff EXPLAIN THE RESULTS of the tests in a way you could understand? Would you say -

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No
- 98 Don't know
- 99 Refused

Q47Int: Now I have a couple of questions about pain management.

Q47: Were you in any pain while you were in the Emergency Department?

- 1 Yes
- 2 No
- 98 Don't know
- 99 Refused

If Q47 = 1 go to Q50; Otherwise go to Q51Int

Q50: Do you think the Emergency Department staff did everything they could to help control your pain? Would you say -

- 1 Yes, definitely
 - 2 Yes, to some extent
 - 3 No
 - 98 Don't know
 - 99 Refused
-

Q51Int: The next section is about the Emergency Department environment and facilities.

Q51: In your opinion, how clean was the Emergency Department? Was it -

- 1 **Very clean**
 - 2 **Fairly clean**
 - 3 **Not very clean**
 - 4 **Not at all clean**
 - 98 Don't know
 - 99 Refused
-

Q52: How clean were the TOILETS in the Emergency Department? Were they -

- 1 **Very clean**
 - 2 **Fairly clean**
 - 3 **Not very clean**
 - 4 **Not at all clean**
 - 5 **I did not use a toilet**
 - 98 Don't know
 - 99 Refused
-

Q53: Were you able to get suitable food or drinks when you were in the Emergency Department? Would you say –
(Interviewer: 'Suitable' means food or drink that you were able to consume.)

- 1 **Yes**
 - 2 **No**
 - 3 **I was told not to eat or drink**
 - 4 **I did not know if I was allowed to eat or drink**
 - 5 **I did not want anything to eat or drink**
 - 98 Don't know
 - 99 Refused
-

For Child questionnaire

Q53: Were you able to get suitable food or drinks for your child when you were in the Emergency Department? Would you say –
(Interviewer: 'Suitable' means food or drink that your child was able to consume.)

- 1 **Yes**
 - 2 **No**
 - 3 **He/She wasn't allowed to eat or drink**
 - 4 **I did not know if he/she was allowed to eat or drink**
 - 5 **He/She did not want anything to eat or drink**
 - 98 Don't know
 - 99 Refused
-

Q54: While you were in the Emergency Dept, did you feel bothered or threatened by other patients or visitors? Would you say -

- 1 **Yes, definitely**
 - 2 **Yes, to some extent**
 - 3 **No**
 - 98 Don't know
 - 99 Refused
-

If Q3 = 1 or 2 go to Q79c; Otherwise go to Q61Int

Q61Int: Now some questions about leaving the Emergency Department.

Q61: Once your medical care was finished and YOU were ready to leave the Emergency Department, were you delayed for any of the following –

- 1 Equipment or aids, such as crutches**
 - 2 Medications**
 - 3 Someone to discharge you, e.g. the doctor**
 - 4 Test results**
 - 5 Letter for your doctor**
 - 6 An ambulance or hospital transport**
 - 7 Other transport**
 - 8 Services after leaving hospital to be arranged, e.g. social services/follow up**
 - 9 Something else** (please specify)
 - 98 Don't know
 - 99 Refused
-

NAT4: Were you given enough information about how to manage your care at home?
Would you say -

- 1 Yes, completely**
 - 2 Yes, to some extent**
 - 3 No**
 - 4 I did not need this type of information**
 - 98 Don't know
 - 99 Refused
-

Q64: Before you left the Emergency Dept., were any NEW medications prescribed for you?
(INTERVIEWER: 'NEW' means medication R hasn't had before)

- 1 Yes
 - 2 No
 - 98 Don't know
 - 99 Refused
-

If Q64 = 1 go to Q65; Otherwise go to Q68.

Q65: Did a member of staff explain to you HOW TO TAKE the new medications?
Would you say -
(INTERVIEWER: 'NEW' means medication R hasn't had before)

- 1 Yes, completely**
 - 2 Yes, to some extent**
 - 3 No**
 - 4 I did not need an explanation**
 - 98 Don't know
 - 99 Refused
-

Q66: Did a member of staff explain THE PURPOSE of the medications you were to take at home in a way you could understand? Would you say -

- 1 Yes, completely**
 - 2 Yes, to some extent**
 - 3 No**
 - 4 I did not need an explanation**
 - 98 Don't know
 - 99 Refused
-

Q67: Did a member of staff tell you about MEDICATION SIDE EFFECTS to watch for?
Would you say -

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No
- 4 I did not need this type of information
- 98 Don't know
- 99 Refused

Q68: Before you left the Emergency Department, were you given any WRITTEN OR PRINTED INFORMATION about your condition or treatment? This may be a leaflet or brochure, but does not include a letter for your doctor. The options are -

- 1 Yes
- 2 No
- 3 I did not need this type of information
- 98 Don't know
- 99 Refused

Q69: Did a member of staff tell you when you could RESUME YOUR USUAL ACTIVITIES, such as when to go back to work or drive a car? Would you say -

- 1 Yes, definitely
- 2 Yes, to some extent
- 3 No
- 4 I did not need this type of information
- 98 Don't know
- 99 Refused

Q71: Did a member of staff tell you about what DANGER SIGNS regarding your illness or treatment to watch for after you went home? Would you say -

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No
- 4 I did not need this type of information
- 98 Don't know
- 99 Refused

Q72: Did hospital staff tell you WHO TO CONTACT if you were worried about your condition or treatment after you left the Emergency Department?

- 1 Yes
- 2 No
- 98 Don't know
- 99 Refused

NAT5: Were adequate arrangements made by the hospital for any services you needed?
Would you say -
(INTERVIEWER: 'services' includes things like rehabilitation or community nurses)

- 1 Yes, completely
- 2 Yes, to some extent
- 3 No
- 4 I did not need any services
- 98 Don't know
- 99 Refused

Q79c: Some patients might wish to give feedback such as compliments or complaints about the care they received. While you were in the Emergency Department, did you see or receive any information on how to do this?

- 1 Yes
- 2 No
- 98 Don't know
- 99 Refused

Q80Int: As I mentioned earlier, the information we collect will help the Department of Health in improving Emergency Department services.

Q80: Was there anything particularly good about your visit to the Emergency Department that you haven't already mentioned?

- 1 Yes (please specify)
- 2 No
- 98 Don't know
- 99 Refused

Q81: Was there anything about the Emergency Department that could have been improved, that you haven't already told me about?

- 1 Yes (please specify)
- 2 No
- 98 Don't know
- 99 Refused

If Q3 = 1 go to Q82a; If Q3 = 2 go to Q82b; Otherwise go to end

Q82a/b: Now, thinking about after you left the Emergency Department and went to a Ward. Was there anything about your time in the Ward that you think could have been improved?
(ALLOW MORE THAN ONE - DON'T READ OUT)

- 1 Too noisy
- 2 Not enough staff
- 3 Sent home too soon
- 4 Signage/getting lost around hospital
- 5 Ward disorganised
- 6 Waiting time
- 7 Other (please specify)
- 8 No
- 9 Don't know
- 10 Refused
- 11 Communication
- 12 Food/meals
- 13 Dirty shower/toilet

Thanks. That concludes the survey.

Your responses are strictly confidential. No personal information will be published or released. Your responses are protected by the Queensland Government's Statistical Returns Act, which means that penalties apply under the laws of Queensland for anyone who released your responses in a way which would identify you. Your responses will be combined with those of other participants to compile aggregate information.

Thank you very much for your assistance.

National Sentinel Events

National sentinel events (NSEs) are rare events, and are defined in a list endorsed by the Australian health ministers. They are reported annually by the Productivity Commission, the Australian Commission on Safety and Quality in Health Care and other agencies. 11 NSEs were reported in Queensland during the 2010-11 and 2011-12 reporting periods and 12 during 2012-13.

The NSE descriptors are quite restrictive and are only a small subset of clinical incidents that result in patient harm. Queensland Health has adopted a much more comprehensive stance on incident management and requires the reporting of all SAC 1 events, even when they do not meet the definition of an NSE. This means that we collect much more data on patient harm than we would under the national list.

National Sentinel Event Number (SE #)		2010-11		2011-12		2012-13	
		Deaths	Permanent Loss of Function	Deaths	Permanent Loss of Function	Deaths	Permanent Loss of Function
NSE 1	Procedures involving the wrong patient or body part resulting in death or major permanent loss of function	0	0	0	1	0	0
NSE 2	Suicide of a patient in an inpatient unit	1	0	1	0	2	0
NSE 3	Retained instruments or other material after surgery, requiring re-operation or further surgical procedure	0	5	0	5	0	4
NSE 4	Intravascular gas embolism resulting in death or neurological damage	0	0	0	0	0	0
NSE 5	Haemolytic blood transfusion reaction resulting from ABO incompatibility	0	0	0	0	0	0
NSE 6	Medication error leading to the death of a patient reasonably believed to be due to incorrect administration of drugs	4	0	0	0	0	0
NSE 7	Maternal death or serious morbidity associated with labour or delivery (excludes neonates and babies)	0	1	1	3	1	5
NSE 8	Infant discharged to wrong family (Not collected in PRIME CI)	0	0	0	0	0	0
Total		5	6	2	9	3	9

Reported Severity Assessment Code (SAC) 1 clinical incident data, by Hospital and Health Service and facility

Purpose of report

The purpose of this report is to provide reported numbers of clinical incidents, for a Hospital and Health Service (HHS), by SAC1 rating. The data is reported for the 2012 and 2013 reporting period.

Data source

- The data presented in this report is extracted from PRIME CI.
- PRIME CI is the Clinical Incident component of the PRIME information system. It is designed to enable reporting, investigation and management of clinical incidents reported by HHS staff.
- The data was extracted on the 28 March 2014 and is subject to change.
- State-wide data has been extracted, by HHS and Facility.
- Data is self-reported by HHS staff.

Data extracted

For each HHS and facility, the table presented details the number of reported SAC1 clinical incidents for the period 1 January 2012 to 31 December 2013.

Note: Facilities are omitted from the table where no SAC1 clinical incidents were reported in the reporting period. Facilities that have < 5 clinical incidents are not provided to ensure individual patients are not identified.

SAC1 definition

Death or likely permanent harm which is not reasonably expected as an outcome of healthcare.

Interpretation notes

The vast majority of care delivered in hospitals and by other health services in Queensland is very safe and effective. However, despite excellent skills and best intentions of our staff, occasionally things do not go as expected. When this happens, it is distressing for patients, families and staff, particularly when the consequence is severe. Publicity around these events can also cause the community to lose trust in their healthcare system.

The number of SAC1 incidents reported describes the number of events involving death or likely permanent harm which was not reasonably expected as an outcome of healthcare, as voluntarily reported by staff in the PRIME (Clinical Incident) information system. It does not describe the level with 'negligence' or 'fault' on behalf of our staff or our systems. It also does not describe the preventability of adverse patient outcomes. For example, a death may not have been reasonably expected and therefore met the definition of a SAC1 incident, but is later determined to have been the result of an underlying condition. However, consistent with

best practice across the world, it is important to us to have a reporting system that captures a broad scope of adverse patient outcomes that *could* be potentially preventable so that we can continue to learn and improve.

Queensland Health has worked hard to develop a patient safety culture that actively encourages staff to report clinical incidents and see these as opportunities to learn about and fix problems. The analysis of these incidents helps us better understand the factors that contribute to patient incidents, and implement changes aimed at improving safety. While some people may interpret reports of clinical incidents as a sign of poor safety, we view incident reporting as an indicator of a good patient safety culture that ultimately leads to better patient care.

RTI Release

2012 2013

Cairns and Hinterland	Total	28	18
	Atherton Hospital	47(3)(b) - CTPI	
	Atherton Primary Health Care Centre		
	Babinda Multi Purpose Health Centre		
	Cairns Community	10	8
	Cairns Hospital	11	6
	Chillagoe Primary Health	47(3)(b) - CTPI	
	Croydon Primary Health		
	Dimbulah Hospital		
	Edmonton Community Health Centre		
	Forsayth Hospital		
	Georgetown Hospital		
	Gordonvale Memorial Hospital		
	Gurriny Yealamucka Health Service (Yarraban)		
	Herberton Hospital		
	Innisfail Community Health Centre		
	Innisfail Hospital		
	Jumbun Community Health Care Centre		
	Lotus Glen Health Service		
	Mareeba Hospital		
	Malanda Primary Health Centre		
	Millaa Millaa Primary Health Centre		
	Mission Beach Community Health Centre		
	Mossman Multi Purpose Health Service		
	Mount Garnet Primary Health Centre		
	Ravenshoe Primary Health Care Centre		
	Smithfield Community Health Centre		
	Tully Community Health Centre		
	Tully Hospital		
Cape York	Total	3	2
	Aurukun Primary Health Care Centre	47(3)(b) - CTPI	
	Coen Primary Health Care Centre		
	Cooktown Multi Purpose Centre		
	Hopevale Primary Health Care Centre		
	Kowanyama Primary Health Care Centre		
	Laura Primary Health Care Centre		
	Lockhart River Primary Health Care Centre		
	Mapoon Primary Health Care Centre		
	Napranum Primary Health Care Centre		
	Pormpuraaw Primary Health Care Centre		
	Weipa Integrated Health Service		
	Wujal Wujal Primary Health Centre		
Central Queensland	Total	32	21
	Baralaba Multipurpose Health Service	47(3)(b) - CTPI	
	Biloela Hospital		
	Banana District Community Health Service		
	Blackwater Hospital (MPHS)		
	Capricorn Coast Hospital & Health Service		
	Capricorn Coast HS		
	CQ Mental Health Services		
	CQ Rural Outpatient Clinics		
	Central Highlands HS		
	Central Highlands HS		

	Emerald Hospital Emerald Community and Primary Health Services Geriatric & Rehabilitation Services	47(3)(b) - CTPI	
	Gladstone Hospital	5	<input type="checkbox"/>
	Gladstone HS Moura Hospital Mount Morgan Multipurpose Health Service North Rockhampton Nursing Centre Offender Health Services	47(3)(b) - CTPI	
	Rockhampton Hospital	6	6
	Rockhampton HS	<input type="checkbox"/>	5
	Springsure Multipurpose Health Service Theodore Multipurpose Health Service Woorabinda Multipurpose Health Service	47(3)(b) - CTPI	
Central West	Total	1	3
	Alpha Hospital Aramac Primary Health Care Centre Barcaldine Hospital Blackall Hospital Boulia Primary Health Care Centre Isisford Primary Health Care Centre Jundah Primary Health Care Centre Longreach Hospital Mutaburra Primary Health Care Centre Tambo Primary Health Care Centre Windorah Primary Health Care Centre Winton Hospital	47(3)(b) - CTPI	
Children's Health Queensland	Total	0	3
	Royal Children's Hospital (RCH)	47(3)(b) - CTPI	
Darling Downs	Total	19	18
	Baillie Henderson Hospital Cherbourg Health Service Chinchilla Health Service Dalby Health Service Glenmorgan Outpatients Clinic Goondiwindi Health Service Inglewood Multipurpose Health Service Jandowae Health Service Kingaroy Health Service Miles Health Service Millmerran Health Service Moonie Outpatients Clinic Murgon Health Service Nanango Health Service Oakey Health Service Stanthorpe Health Service Tara Health Service Taroom Health Service Texas Multi Purpose Health Service	47(3)(b) - CTPI	
	Toowoomba Health Service	12	8
	Wandoan Outpatients Clinic Warwick Health Service Wondai Health Service	47(3)(b) - CTPI	
Gold Coast	Total	37	44
	Carrara Health Centre	47(3)(b) - CTPI	
	Community	15	16
	Gold Coast University Hospital	47(3)(b) - CTPI	
	Robina Hospital	7	7

	Southport Hospital	15	17
Mackay	Total	12	9
	Bowen Hospital Clermont Multi Purpose Health Service Collinsvale Multi Purpose Health Service Dysart Hospital Glenden Community Health Centre	47(3)(b) - CTPI	
	Mackay Base Hospital	8	5
	Mackay Community Health Middlemount Community Health Centre Moranbah Hospital Moranbah Community Health Centre Sarina Hospital and Primary Health Care Centre Proserpine Hospital	47(3)(b) - CTPI	
Metro North	Total	85	54
	Aspley Community Health Centre Biala City Community Health Centre Brighton Community Health Centre Caboolture Community Health Centre	47(3)(b) - CTPI	
	Caboolture Hospital	11	5
	GP Oral Health Services Haywyn Centre Kilcoy Hospital	47(3)(b) - CTPI	
	Mental Health Service	38	29
	North Lakes Health Precinct North West Community Health Centre Nundah Community Health Centre Pine Rivers Community Health Centre Redcliffe Community Health Centre	47(3)(b) - CTPI	
	Royal Brisbane & Women's Hospital (RBWH)	23	13
	Redcliffe Hospital	5	5
	SaAS (Subacute & Ambulatory Services)	47(3)(b) - CTPI	
	The Prince Charles Hospital	6	
	Toowong Community Health Centre	47(3)(b) - CTPI	
Metro South	Total	51	50
	Bayside MH	9	9
	Beenleigh Community Health Centre Beaudesert Hospital Browns Plains Community Health Centre Community & Primary Health Services Eight Miles Plains Community Health Centre Inala Community Health Centre	47(3)(b) - CTPI	
	Logan Central Community Health Centre		7
	Logan Hospital	8	8
	Marie Rose Centre (Dunwich)	47(3)(b) - CTPI	
	Princess Alexandra Hospital	17	23
	Queen Elizabeth II Jubilee Hospital Redland Health Service Centre	47(3)(b) - CTPI	
	Redland Hospital	7	
	Redland Residential Care Wynnum Health Service	47(3)(b) - CTPI	
North West	Total	2	0
	Burketown Health Centre Camooweal Health Centre Cloncurry Hospital Dajarra Hospital Doomadgee Hospital Julia Creek Hospital	47(3)(b) - CTPI	

	Karumba Hospital Mental Health Mornington Island Primary Health Care Centre Mount Isa Hospital Normanton Hospital	47(3)(b) - CTPI	
South West	Total	1	1
	Augathella Hospital Bollon Bush Nursing Service Charleville Hospital Cunnamulla Hospital Dirranbandi Hospital Injune Hospital Mitchell Hospital (MPHS) Morven Outpatients Clinic Mungindi Hospital Quilpie Hospital Roma Hospital St George Hospital Surat Hospital Thargomindah Hospital Wallumbilla Hospital	47(3)(b) - CTPI	
Sunshine Coast	Total	12	12
	Nambour Hospital (NGH)	9	12
	Caloundra Health Service Gympie Malaney	47(3)(b) - CTPI	
Torres Strait - Northern Peninsula	Total	2	3
	Bamaga Hospital Central - Masig (Yorke) PHC Thursday Island Hospital	47(3)(b) - CTPI	
Townsville	Total	21	29
	The Townsville Hospital	16	19
	Ayr Health Service Cardwell Community Health Centre Charters Towers Health Service Charters Towers Rehabilitation Unit Eventide Residential Aged Care Facility Home Hill Health Service Hughenden Health Service Ingham Health Service Joyce Palmer Health Service Kirwan Campus Magnetic Island Health Service Richmond Health Service Vincent Campus, Palmerston Street	47(3)(b) - CTPI	
West Moreton	Total	15	25
	Boonah Hospital Brisbane Youth Detention Centre Esk Hospital Gatton Health Service Goodna Community Health Ipswich Community Dental Clinic	47(3)(b) - CTPI	
	Ipswich Hospital	10	21
	Ipswich Health Plaza Laidley Hospital Oral Health Services The Park Centre for MH	47(3)(b) - CTPI	
Wide Bay	Total	22	20

REFUSED TO SIGN

Biggenden Health Service	47(3)(b) - CTPI
Bundaberg	10 7
Childers Hospital Eidsvold Health Service Fraser Coast Gayndah Health Service Gin Gin Hospital	47(3)(b) - CTPI
Hervey Bay Hospital	7
Maryborough Hospital Monto Health Service Mount Perry Health Centre Mundubbera MPHS Yaralla Place	47(3)(b) - CTPI

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