



# National Inpatient Experience Survey 2019

Experiences of patients  
admitted for a tumour or  
cancer

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## About the National Inpatient Experience Survey 2019

The National Inpatient Experience Survey is a nationwide survey that offers patients the opportunity to describe their experiences of public acute healthcare in Ireland. The survey is a partnership between the Health Information and Quality Authority (HIQA), the Health Service Executive (HSE) and the Department of Health. The survey was conducted for the first time in 2017 and repeated in 2018 and 2019.

The aim of the survey is to find out about patients' experiences in public acute hospitals and to use their feedback to identify areas of good experience, and areas needing improvement. The HSE responded to the 2017 and 2018 survey results by producing detailed quality improvement plans at national, hospital group and hospital levels. The implementation of these plans is coordinated by an oversight group, and a wide range of initiatives have already been introduced across Ireland's public acute hospitals. Some examples of these initiatives can be seen at [www.yourexperience.ie/inpatient/hospital-initiatives/](http://www.yourexperience.ie/inpatient/hospital-initiatives/).

Nationally, 26,897 people were invited to participate in the third National Inpatient Experience Survey. In total, 12,343 completed the survey, resulting in a response rate of 46%.

### About this report

This report focuses on the experiences of the 1,100 participants in the National Inpatient Experience Survey 2019 who stated that the main reason for their stay in hospital was a tumour or cancer. Throughout this report, the experiences of patients admitted for a tumour or cancer will be compared to those of patients admitted for all other reasons.

## **What were the main findings for patients admitted for a tumour or cancer?**

All participants were asked to specify the main reason for their recent stay in hospital. In total, 1,100 patients whose main reason for attending hospital was a tumour or cancer diagnosis or treatment took part in the survey. The majority of patients who were admitted for a tumour or cancer reported positive experiences in hospital, with 88% saying they had a good or very good overall experience, compared with 84% of patients admitted for other reasons. Patients admitted for a tumour or cancer rated their experience of the admissions stage of care as similar to patients admitted for other reasons, but gave more positive ratings for care on the ward, examinations, diagnosis and treatment, and discharge or transfer than patients admitted for other reasons. Patients admitted for a tumour or cancer gave similar or more positive ratings for all questions on the survey compared to patients admitted for other reasons, with the exception of hospital food which was rated lower by patients admitted for a tumour or cancer. Confidence and trust in the hospital staff and feeling like they were treated with respect and dignity during their time in hospital, were among the highest scoring questions on the survey for patients admitted for cancer or tumour.

## **Who took part in the survey?**

In total, 26,897 people discharged from all public acute hospitals in Ireland during the month of May 2019 were invited to participate in the survey. Of these, 12,343 people completed the survey — a response rate of 46%. In total, 1,100 respondents (8.9%) stated that 'tumour/cancer' was the main reason for their most recent stay in hospital. Of the patients admitted for a tumour or cancer, 556 were male (50.5%) and 544 (49.5%) were female. Four hundred and eighty-two respondents (43.8%) said that their stay in hospital was an emergency. Table 1 below provides information on the patients admitted for a tumour or cancer who took part in the survey.

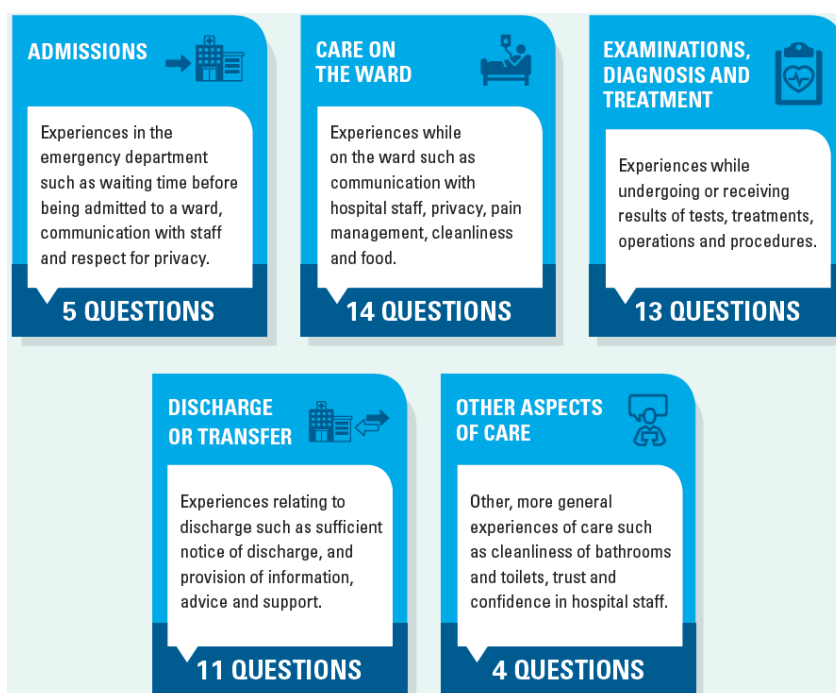
**Table 1. Characteristics of patients admitted for a tumour or cancer who responded to the survey.**

Age category		
	N	%
16 to 35 years	36	3.3%
36 to 50 years	134	12.2%
51 to 65 years	392	35.6%
66 to 80 years	436	39.6%
81 years or older	102	9.3%
Sex		
Male	556	50.5%
Female	544	49.5%
Admission route		
Emergency	482	43.8%
Non-emergency	618	56.2%

## Survey results for the stages of care along the patient journey

The National Inpatient Experience Survey 2019 followed the patient journey through hospital from admission to discharge. The 2019 questionnaire is available to download from [www.yourexperience.ie](http://www.yourexperience.ie).

The survey questions were grouped into five stages along the patient journey:



## Interpreting the results for the stages of care

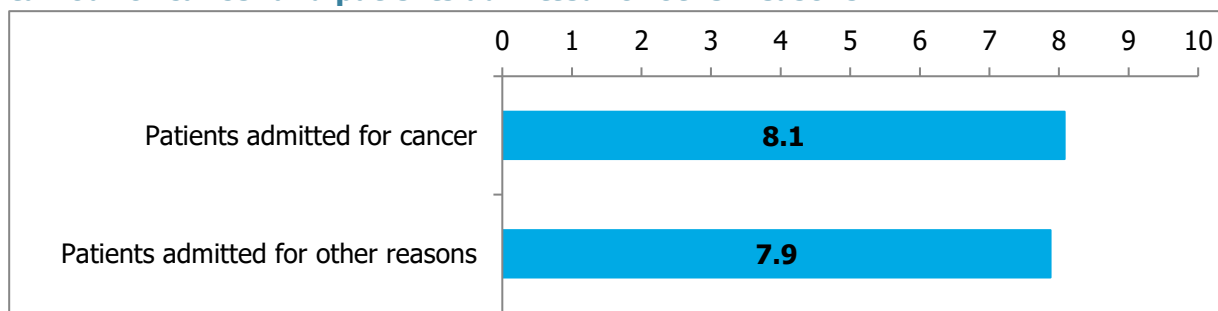
Scores out of 10 are given for each question belonging to a stage of care or to a stage as whole. A score of 0 indicates a very negative experience and a score of 10 indicates a very positive experience.

Statistical tests were carried out to examine if there were significant differences in patient experience between patients admitted for a tumour or cancer and those admitted for all other reasons. Throughout this report, when patients admitted for a tumour or cancer scored significantly higher than patients admitted for other reasons, this is described as 'higher'. When patients admitted for a tumour or cancer scored significantly lower than patients admitted for other reasons, this is described as 'lower'. When there is no statistically significant difference between the scores, this is described as 'about the same'.

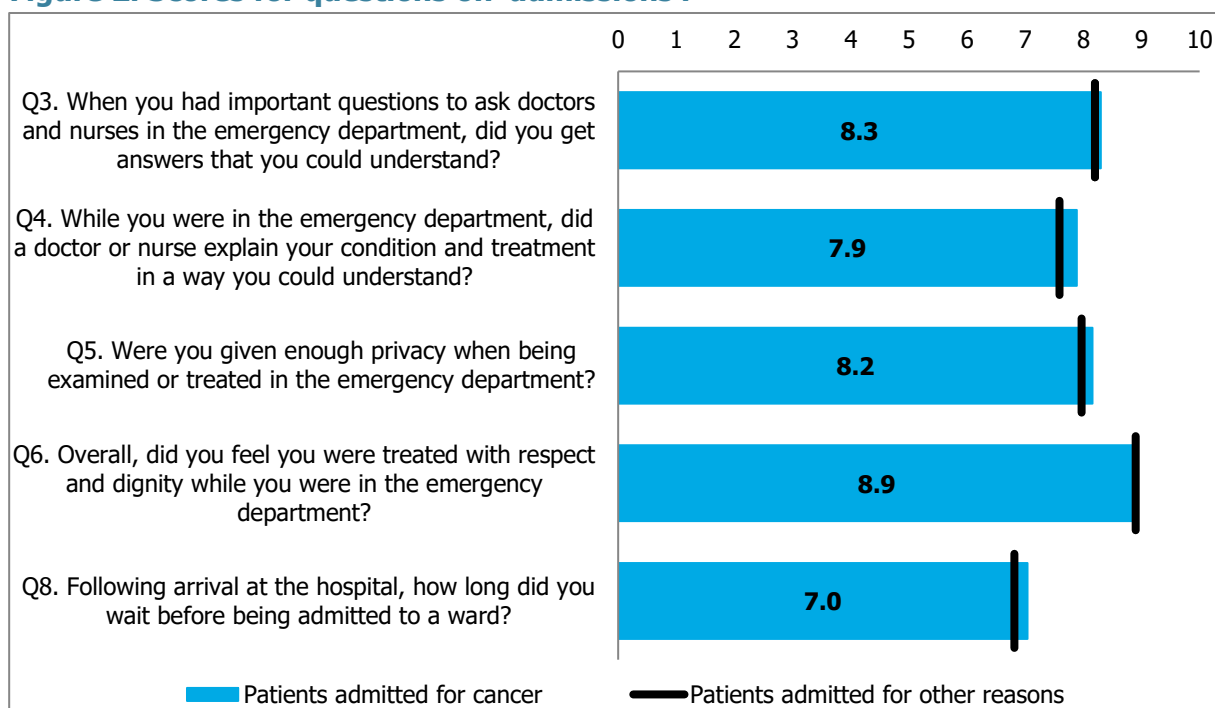
## Admissions

Figure 1 compares the overall score for 'admissions' for patients admitted for a tumour or cancer with the score for patients admitted for other reasons. Figure 2 shows the scores of patients admitted for a tumour or cancer for questions on this stage of care. For each of the questions on admissions, patients admitted for a tumour or cancer rated their experience as about the same as patients admitted for other reasons.

**Figure 1. Comparison of the average score for 'admissions' for patients with a tumour or cancer and patients admitted for other reasons.**



**Figure 2. Scores for questions on 'admissions'.**



### Emergency department waiting times

The HSE sets targets for the performance of acute hospitals, including targets on waiting times in emergency departments.<sup>1</sup> These targets include that:

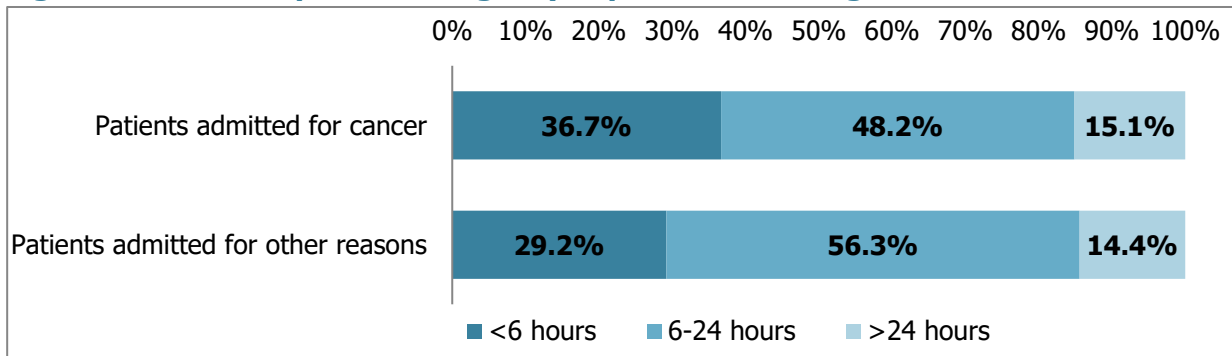
- 75% of people attending the emergency department are discharged or admitted to a ward within six hours of registration and none should wait for longer than nine hours.
- 95% of people attending the emergency department aged 75 years or older are discharged or admitted to a ward within six hours of registration and none should wait for longer than nine hours.

In total, 143 respondents (36.7%) who were admitted for a tumour or cancer said they were admitted to a ward within six hours of arriving at the emergency department, while 188 respondents (48.2%) reported waiting between six and 24 hours. Furthermore, 59 patients admitted for a tumour or cancer (15.1%) said that they waited 24 hours or more before being admitted to a ward, with 16 of these saying they waited more than 48 hours.

Figure 3 outlines the patient-reported waiting times for patients admitted for a tumour or cancer, compared with patients admitted for other reasons.

<sup>1</sup> The HSE measures emergency department waiting times differently to the survey, namely from the time a patient registers at the emergency department until they leave it. It is likely that there are some differences between survey findings and the official HSE figures. The HSE 2019 targets can be viewed at: <https://www.hse.ie/eng/services/publications/kpis/acute-hospitals-metadata-2019.pdf>

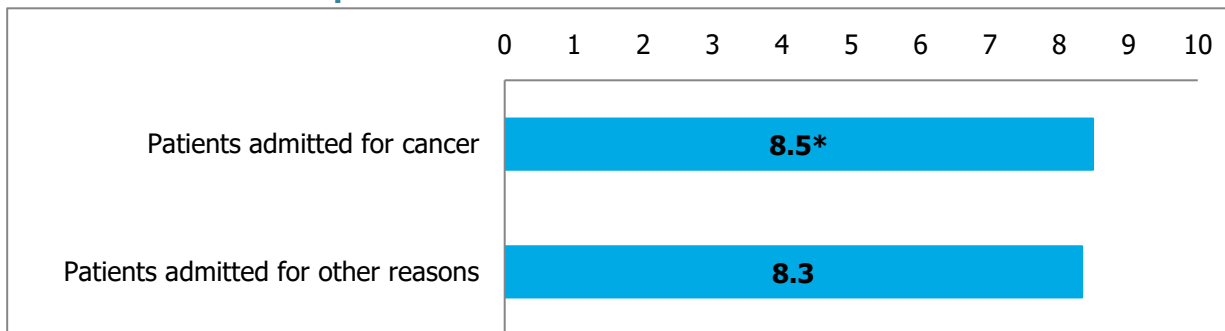
**Figure 3. Patient-reported emergency department waiting times.**



### Care on the ward

Figure 4 compares the score for 'care on the ward' for patients admitted for a tumour or cancer with the score for patients admitted for other reasons. Figure 5 shows the scores for questions on this stage of care. For most of the questions on this stage of care, patients admitted for a tumour or cancer rated their experience as higher or about the same as patients admitted for other reasons. However, patients admitted for a tumour or cancer gave lower ratings on hospital food, with 12.5% (n=130) saying that they would rate the hospital food as 'poor' (Q15), compared with 8.4% of patients admitted for other reasons (n=886) who rated the hospital food as poor.

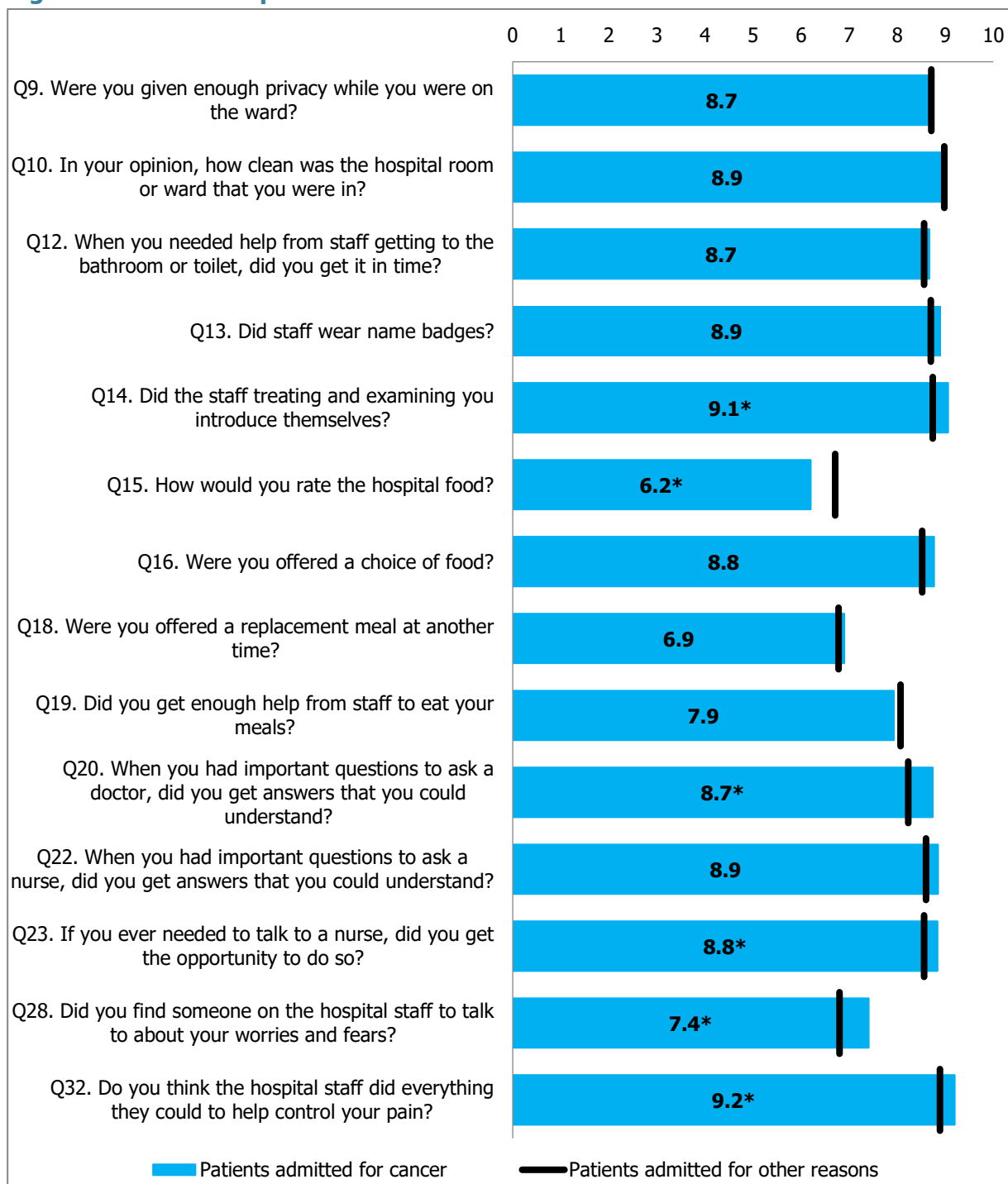
**Figure 4. Comparison of the average score for 'care on the ward' for patients with a tumour or cancer and patients admitted for other reasons.**



\*Denotes statistically significant differences between patients admitted for a tumour or cancer and those admitted for other reasons.



**Figure 5. Scores for questions on 'care on the ward'.**

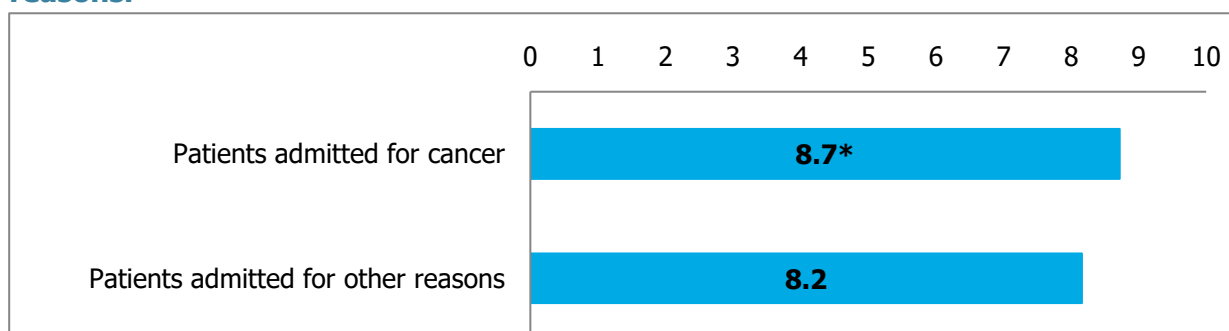


\*Denotes statistically significant differences between patients admitted for a tumour or cancer and those admitted for other reasons.

## Examinations, diagnosis and treatment

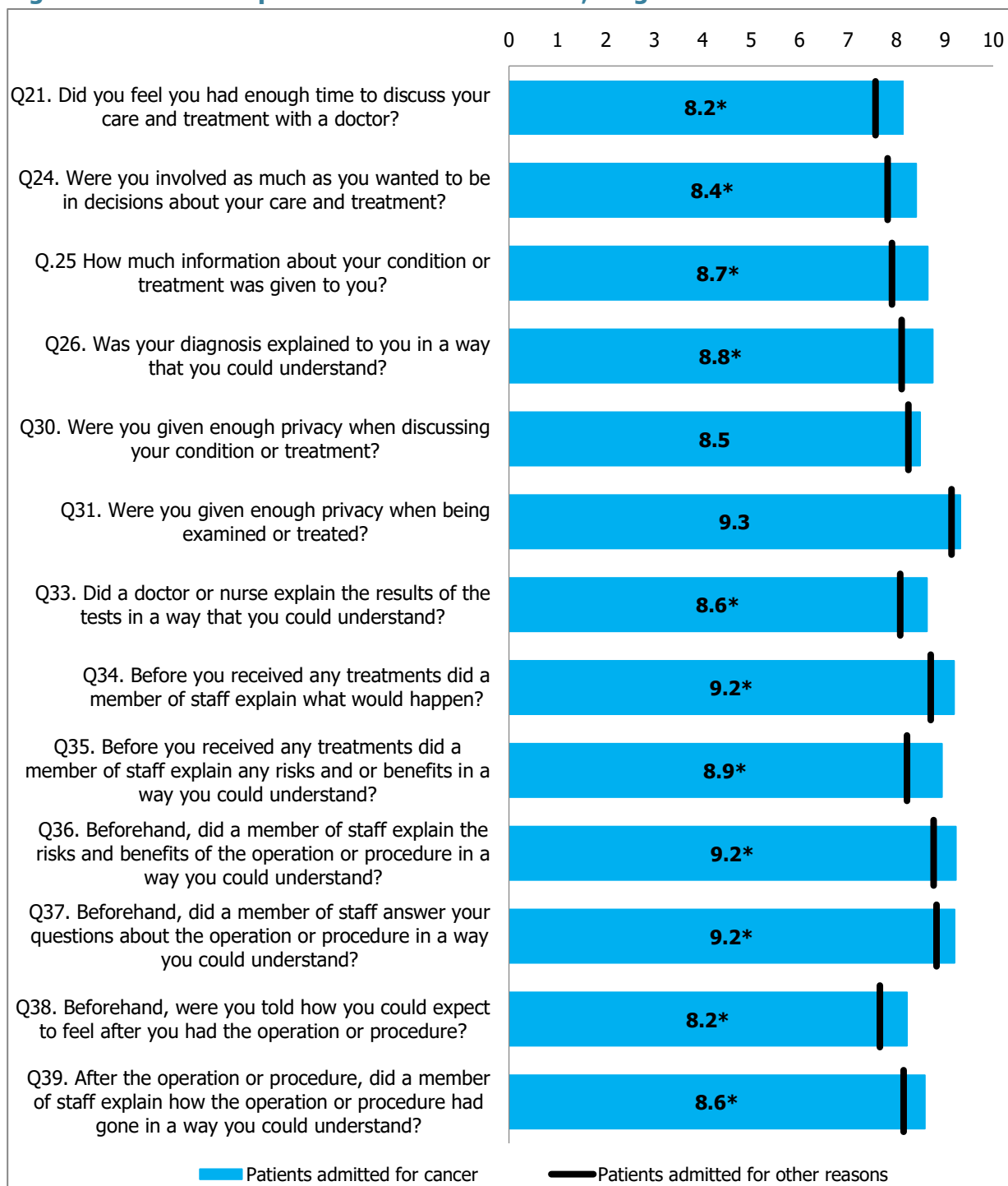
Figure 6 compares the overall score for 'examinations, diagnosis and treatment' for patients admitted for a tumour or cancer with the scores for patients admitted for other reasons. Figure 7 shows the scores for questions on this stage of care. For most of the questions on this stage of care, patients admitted for a tumour or cancer rated their experience as higher than patients admitted for other reasons.

**Figure 6. Comparison of the average score for 'examinations, diagnosis and treatment' for patients with a tumour or cancer and patients admitted for other reasons.**



\*Denotes statistically significant differences between patients admitted for a tumour or cancer and those admitted for other reasons.

**Figure 7. Scores for questions on 'examinations, diagnosis and treatment'.**

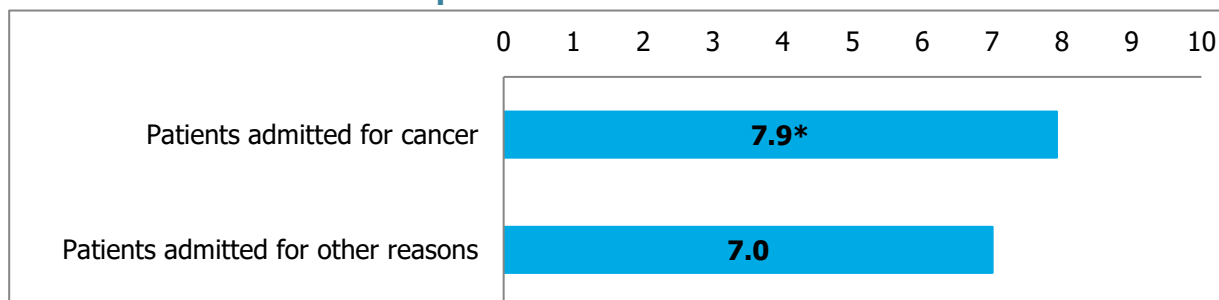


\*Denotes statistically significant differences between patients admitted for a tumour or cancer and those admitted for other reasons.

## Discharge or transfer

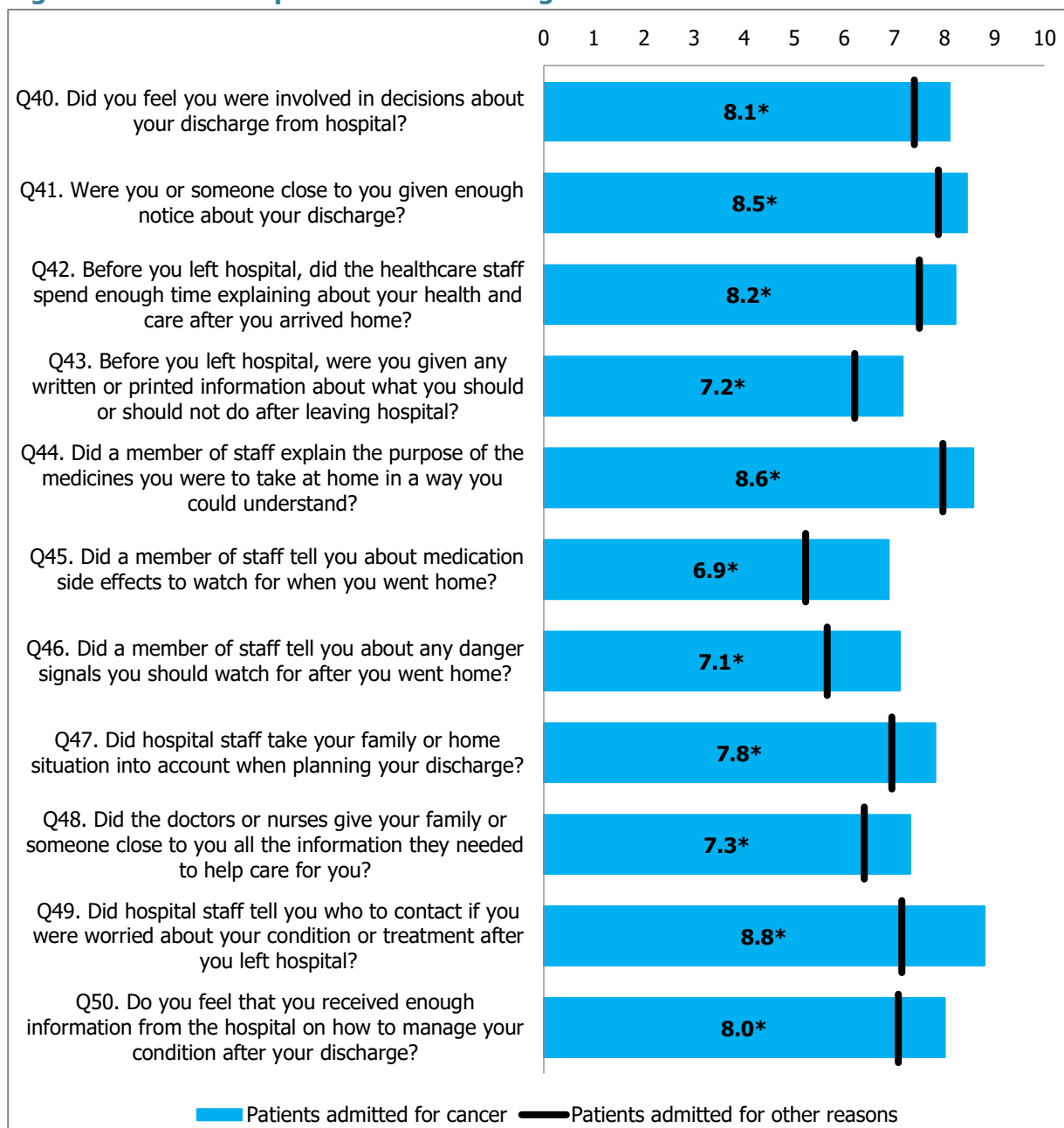
Figure 8 compares the overall score for 'discharge or transfer' for patients admitted for a tumour or cancer with the scores for patients admitted for other reasons. Figure 9 shows the scores for questions on this stage of care. Across all of the questions on this stage of care, patients admitted for a tumour or cancer rated their experience as higher than patients admitted for other reasons.

**Figure 8. Comparison of the average score for 'discharge or transfer' for patients with a tumour or cancer and patients admitted for other reasons.**



\*Denotes statistically significant differences between patients admitted for a tumour or cancer and those admitted for other reasons.

**Figure 9. Scores for questions on 'discharge or transfer'.**

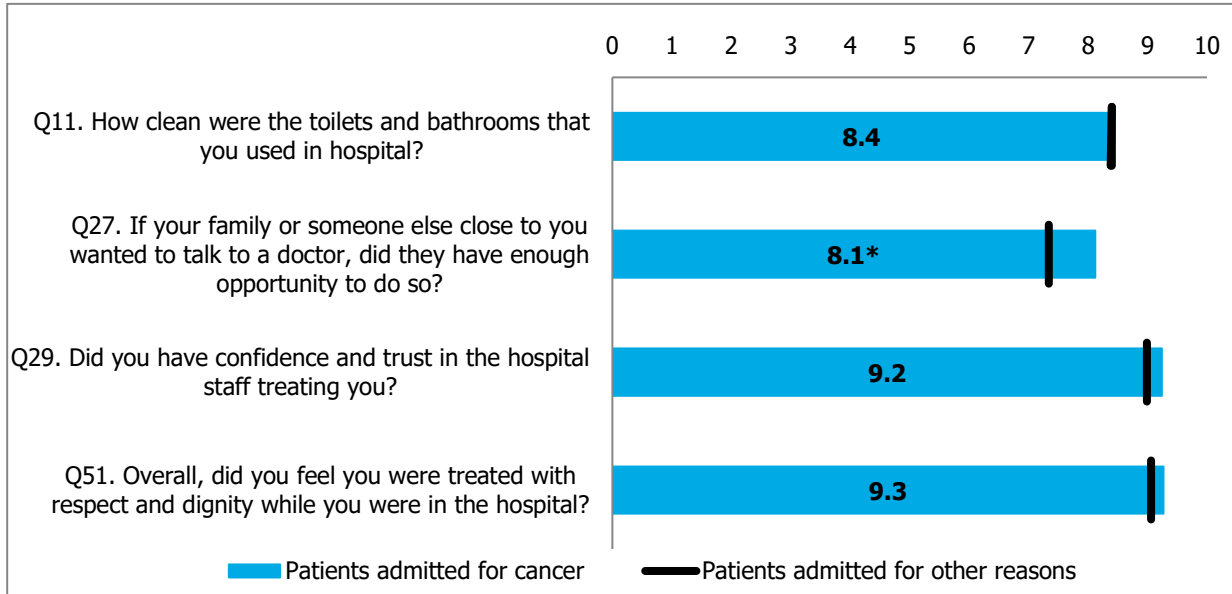


\*Denotes statistically significant differences between patients admitted for a tumour or cancer and those admitted for other reasons.

## Other aspects of care

Figure 10 shows the scores for questions on this stage of care for patients admitted for a tumour or cancer.

**Figure 10. Scores for 'other aspects of care'.**



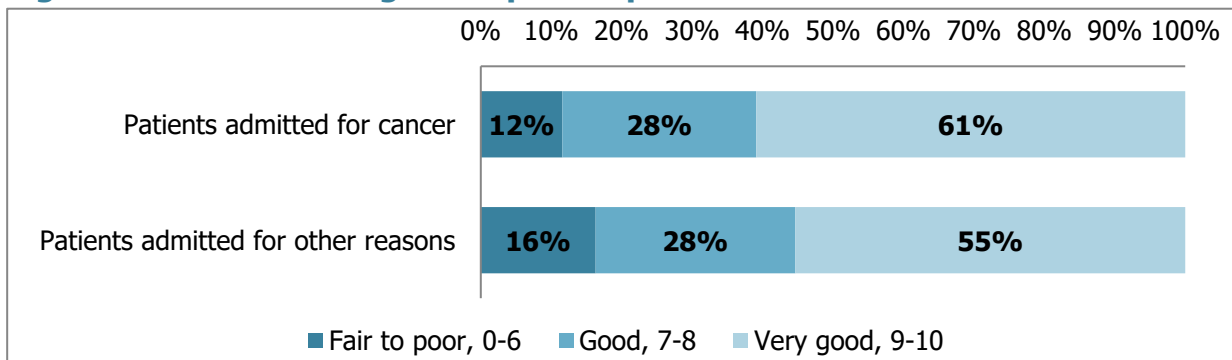
\*Denotes statistically significant differences between patients admitted for a tumour or cancer and those admitted for other reasons.

## Overall experience

Respondents were asked to rate their overall hospital experience on a scale from 0 to 10, with 10 being the most positive experience, and 0 the most negative experience. Of the patients admitted for a tumour or cancer, 61% rated their care as very good, compared with 55% of patients admitted for other reasons.

Figure 11 compares the average overall rating of hospital experience of patients admitted for a tumour or cancer with the rating of patients admitted for other reasons.

**Figure 11. Overall rating of hospital experience.**

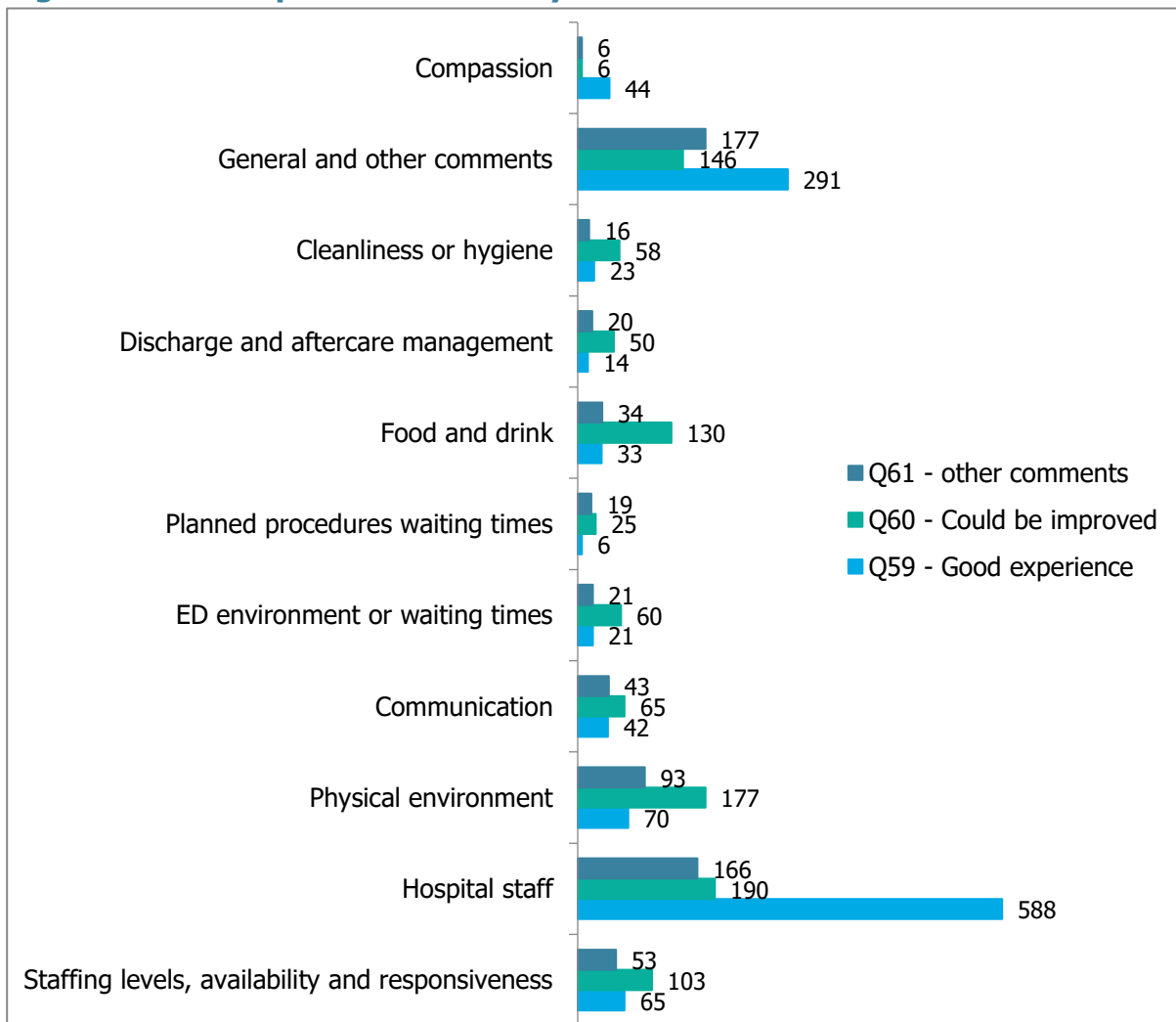


## In their own words: analysis of patients' comments

The last three questions (questions 59-61) of the survey asked patients to provide additional information, in their own words, on their experiences in hospital. These free-text questions allowed people to give a more in-depth description of specific aspects of their care. It also allowed them to talk about various things (positive or negative) that were not captured by the structured questions. In total, 1,913 comments were received from patients admitted for a tumour or cancer in response to the free-text questions in the 2019 survey.

Figure 12 shows the breakdown of comments by theme for each of the three open-ended questions. Question 59 asked participants what was particularly good about their hospital care, Question 60 asked participants what could be improved, and Question 61 asked participants for any other comments or suggestions. For Question 59, most of the comments related to the 'Hospital staff' and 'General and other comments' themes. For Question 60, most comments related to the themes of 'Hospital staff' and 'Physical environment'. Responses to Question 61 covered various themes. A selection of relevant comments from these themes is provided in Table 2.

**Figure 13. Participant comments by theme.**



**Table 2. Example comments.**

<b>Positive comments</b>
<p>“I felt very informed going into surgery. I was given detailed information after surgery, as to how the operation went. Majority of staff were kind and attentive. Hospital was very clean.”</p>
<p>“I was treated with great respect and dignity, excellent staff... I was given such a high standard of care by all I came into contact with, i.e. surgeon, anaesthetist, nurses, physiotherapist, dietician, carers, all grades of staff, catering staff, night nurses, day nurses. What an exceptional team of staff... I loved their professionalism and sense of humour, reassurance and wonderful support shown to me. Thanks all.”</p>
<p>“All the staff were so kind and caring and had time for everyone despite working long shifts. I was treated with such kindness and care and I am so grateful to everyone who aided in my speedy recovery. Everyone from doctors, nurses, kitchen staff etc. were always smiling and had a kind word for everyone. Couldn't praise them enough!”</p>
<b>Suggestions for improvement</b>
<p>“Unacceptable proportion of equipment out of order through lack of maintenance. Washbasins in toilets unusable because taps need new washers. High proportion of air-conditioning units not working and needing servicing.”</p>
<p>“Amount of time with a physiotherapist could have been greater. Needed to practice exercises in the presence of the physio.”</p>
<p>“Doctors, oncologists etc. need more skills on giving bad news. They need to realise the patient/family are not robots. They need to be more caring/understanding. They need to explain results more in a manner that is not so cold.”</p>
<b>Other comments</b>
<p>“Keep emergency exit routes clear and free of obstructions. Corridors are not equipment stores!”</p>
<p>“My recovery room experience post op was excellent from staff, care and environmental experiences. Thank you.”</p>
<p>“Create a way where Oncology patients can always be admitted through Oncology. I have spoken to many patients who feel as I do, you go into A&amp;E and you get a dose sitting in waiting room. Takes forever for a doctor from Oncology team to get down to see you. I would much prefer to be admitted through Oncology.”</p>



## Conclusion

### What were the experiences of patients admitted for a tumour or cancer in May 2019?

Most patients who were admitted for a tumour or cancer said that they had positive overall experiences — with 88% of patients admitted for a tumour or cancer said they had a good or very good experience, compared with 84% of patients admitted for other reasons.

Patients admitted for a tumour or cancer provided higher scores for care on the ward, examinations, diagnosis and treatment, and discharge or transfer than patients admitted for other reasons. Patients admitted for a tumour or cancer gave particularly high ratings for examinations, diagnosis and treatment, with most of the questions on this stage of care receiving higher scores from patients admitted for a tumour or cancer than from patients admitted for other reasons. Overall, among patients admitted for a tumour or cancer, confidence and trust in the hospital staff, as well as feeling like they were treated with respect and dignity during their time in hospital, were among the highest scored questions on the survey. However, patients admitted for a tumour or cancer gave lower ratings for hospital food than patients admitted for other reasons.

## **Appendix 1: Calculating differences between groups**

### **How do we calculate differences between patient groups?**

Statistical tests were carried out to examine if there were significant differences between scores of patients admitted for a tumour or cancer and scores of patients admitted for other reasons for each question. A t-test with a significance level of 0.001 was used to compare question scores. A statistically significant difference means it is unlikely that results were obtained by chance alone if there was no real difference between the groups. Therefore, when a score is significantly 'higher than' or 'lower than', this is unlikely to have occurred by chance. It should be noted that these results are unadjusted, meaning that there are other, unmeasured factors that could affect patients' experiences apart from their reason for admission.



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