Development of the Small Hospitals Emergency Care Survey 2015-16

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Background

In 2015, the Bureau of Health Information (BHI) identified the need to collect the experiences of people attending small and rural hospitals for emergency care. Following consultation with key stakeholders and the survey program’s Strategic Advisory Committee, it was identified that the key consideration in the development of this survey was comparability to the most recent Emergency Department Patient Survey (EDPS).

This document summarises the changes from the 2015-16 EDPS questionnaire to the 2015-16 Small Hospitals Emergency Care Survey (SHECS) 2015-16.

Methods

BHI began a process of review and redevelopment of the 2015-16 EDPS to arrive at a questionnaire deemed to be appropriate for collecting emergency care experiences at small and rural NSW hospitals. Due to the high proportion of rural inpatients admitted through the ED, BHI was able to use examples and learnings from the development of the Small and Rural Hospitals Admitted Patient Survey to identify questions that needed change.

BHI also undertook statistical review of questions used in the 2014-15 EDPS survey. This analysis determined the following for each question:

- Response patterns for each question, including rates of item non-response (not answering a question when they should have), invalid responses (selecting more than one answer to a single response question or answering a question they should have skipped past) and non-specific responses, such as ‘don’t know’, ‘can’t remember’ or ‘not applicable to me’
- Ceiling and floor effects of response categories (responses where almost all patients are very positive or very negative, with little variation between hospitals) using the scored mean, standard deviation and skewness of responses
- Correlations between questions (using the most positive response category) to understand if any questions appear to be duplicating the same aspect of care (using the Pearson method).

Approval of changes

A final version of the draft questionnaire was approved by the Director, Surveys, and the CEO, BHI. The questionnaire was transferred from design to layout for printing and scanning. Following review of the design file, the CEO gave final approval for the questionnaire to be used and the survey to begin. The questionnaire was then provided to the external contractor for printing and mailing.
### Summary of questionnaire changes from EDPS 2015-16 to SHECS 2015-16

The following lists the changes made from the base questionnaire (EDPS 2015-16) to the new Small Hospitals Emergency Care Survey 2015-16. Rationale and evidence for changes can be found in the following section.

<table>
<thead>
<tr>
<th>EDPS 2015-16 Q number</th>
<th>Question</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>Were the reception staff you met on your arrival to the ED polite and courteous?</td>
<td>Changed to ‘Were the staff you met on your arrival to the ED polite and courteous?’</td>
</tr>
<tr>
<td>9</td>
<td>Did reception staff give you enough information about what to expect during your visit?</td>
<td>Changed to ‘Did staff who met you on arrival give you enough information about what to expect during your visit?’</td>
</tr>
<tr>
<td>10</td>
<td>Did reception staff tell you how long you would have to wait for treatment?</td>
<td>Changed to ‘Did staff who met you on arrival tell you how long you would have to wait for treatment?’</td>
</tr>
<tr>
<td>11</td>
<td>Was the waiting time given to you by reception staff about right?</td>
<td>Changed to ‘Was the waiting time given to you by staff who met you on arrival about right?’</td>
</tr>
<tr>
<td>27</td>
<td>Did the ED health professionals introduce themselves to you?</td>
<td>Added two new response options:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I already knew all the staff who cared for me”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“Don’t know/can’t remember”</td>
</tr>
<tr>
<td>57</td>
<td>Thinking about when you left the ED, were adequate arrangements made by the hospital for any services you needed?</td>
<td>Added one new response option:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“These services are not offered in the area”</td>
</tr>
<tr>
<td>65</td>
<td>Did you received a copy of a letter from the Emergency Department (ED) doctors to your family doctor?</td>
<td>Deleted this question</td>
</tr>
<tr>
<td>68</td>
<td>What were the main reasons for delay [to discharge]?</td>
<td>Two existing response options modified:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I had to wait to see the doctor” changed to “I had to wait to see a health professional”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“I had to wait for the letter for my GP” changed to “I had to wait for the discharge letter”</td>
</tr>
<tr>
<td>75</td>
<td>While in the Emergency Department (ED), did you receive or see any information about how to comment or complain about your case?</td>
<td>Deleted this question</td>
</tr>
<tr>
<td>77</td>
<td>Not including the reason you came to the ED, during the visit, or soon afterwards, did you experience any of the following complications or problems?</td>
<td>Added one new response option:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>“Severe pain due to the treatment”</td>
</tr>
</tbody>
</table>
|   | Changes to second page                                                                 | Added additional clarifying text at end of first paragraph:
|---|----------------------------------------------------------------------------------------| “This survey uses the term 'Emergency Department' to refers to all emergency care provided by the hospital you visited.”
|   | Throughout where relevant                                                              | The first question on each page that references ED presents this as ‘Emergency Department (ED)’, while subsequent questions only use ‘ED’. The exception to this is the overarching performance questions about overall rating of care and whether the patient would speak highly of their ED experience to their friends and family. These two questions retained the full wording of the term.

|   | Changes to cover letter                                                                 | Cover completely revised with respect to content and branding, in line with other surveys for 2016 onwards. Additional text added to clarify the questionnaire refers to all ‘emergency care provided by this hospital’

|   | Data linkage question                                                                  | Moved from back cover to page 11 to reduce missing response rate

|   | What were your reasons for going to the ED?                                            | Added one new response option: “My regular doctor/GP was working there”

|   | Was an interpreter provided when you needed one in the Emergency Department (ED)?      | Deleted this question

|   |                                                                                       |
Details of changes

**Question 8**  
**Current question**  
Were the staff you met on your arrival to the ED polite and courteous?
- Yes, definitely
- Yes, to some extent
- No
- I didn’t meet the reception staff
- Don’t know/can’t remember

**Action**  
Changed question wording to ‘Were the staff you met on your arrival to the ED polite and courteous?’

**Rationale**  
Some small hospitals do not have receptions in their emergency care area so this change has been made to clarify that the question is referring to any staff members met at, or soon after, arriving.

**Question 9**  
**Current question**  
Did reception staff give you enough information about what to expect during your visit?
- Yes, completely
- Yes, to some extent
- No
- Don’t know/can’t remember

**Action**  
Changed question wording to ‘Did staff who met you on arrival give you enough information about what to expect during your visit?’

**Rationale**  
Some small hospitals do not have receptions in their emergency care area so this change has been made to clarify that the question is referring to any staff members met at, or soon after, arriving.

**Question 10**  
**Current question**  
Did reception staff tell you how long you would have to wait for treatment?
- Yes
- No
- I didn’t need to wait for treatment
- Don’t know/can’t remember.
Action

Changed question wording to ‘Did staff who met you on arrival tell you how long you would have to wait for treatment?’

Rationale

Some small hospitals do not have receptions in their emergency care area so this change has been made to clarify that the question is referring to any staff members met at, or soon after, arriving.

**Question 11**

Current question

Was the waiting time given to you by reception staff about right?

- Yes
- No, I didn’t wait that long
- No, I waited longer
- Don’t know/can’t remember

Action

Changed question wording to ‘Was the waiting time given to you by staff who met you on arrival about right?’

Rationale

Some small hospitals do not have receptions in their emergency care area so this change has been made to clarify that the question is referring to any staff members met at, or soon after, arriving.

**Question 27**

Current question

Did the ED health professionals introduce themselves to you?

- Yes, always
- Yes, sometimes
- No

Action

The response categories were changed to:

- Yes, always
- Yes, sometimes
- No
- I already knew all the staff who cared for me
- Don’t know/can’t remember

Rationale

During the development of the 2015 Small and Rural Hospitals Survey, patient focus groups identified that patients are much more likely to know the staff caring for them than in large metro hospitals. This meant that the question on staff introducing themselves needed to be modified if it was still to reflect performance by the hospital. A response option of “I already knew all the staff who cared for me” was added to correct for this. Testing also suggested that this
question might suffer a recall bias due to the higher proportion of older patients so a ‘don’t know/can’t remember’ option was also added. This means that this question is not directly comparable to the base question from the EDPS.

**Questions 57**

**Current questions**

Thinking about when you left the ED, were adequate arrangements made by the hospital for any services you needed?

- Yes, completely
- Yes, to some extent
- No, arrangements were not adequate
- It was not necessary

**Action**

The response categories were changed to:

- Yes, completely
- Yes, to some extent
- No, arrangements were not adequate
- These services are not offered in the area
- It was not necessary.

**Rationale**

Development work for the 2015 Small and Rural Hospitals Survey identified that many services weren’t available in the rural setting that are in the metro setting – it was seen as important to capture this.

**Question 65**

**Current question**

Did you receive a copy of a letter from the Emergency Department (ED) doctors to your family doctor (GP)?

- Yes
- No
- Don’t know/can’t remember

**Action**

Deleted this question.

**Rationale**

Development work for the 2015 Small and Rural Hospitals Survey identified that many patients were treated by their family doctor while in hospital. Following engagement with key staff in the Ministry of Health, it was agreed that it would not be appropriate to ask this question as the GP was effectively sending the discharge summary to themselves – as a performance question, this was seen as inappropriate so the question was deleted.

**Question 68**

**Current question**

What were the main reasons for delay?
Please X all the boxes that apply to you

- I had to wait for medicines
- I had to wait to see the doctor
- I had to wait for an ambulance or hospital transport
- I had to wait for the letter for my GP
- I had to wait for test results
- I had to wait for a bed in a ward
- Some other reason
- Don’t know/can’t remember

Action

The response categories were changed to:

- I had to wait for medicines
- I had to wait to see a health professional
- I had to wait for an ambulance or hospital transport
- I had to wait for the discharge letter
- I had to wait for test results
- I had to wait for a bed in a ward
- Some other reason
- Don’t know/can’t remember

Rationale

Because many emergency care areas in small hospitals do not have doctors in attendance at all times, it was seen as appropriate to change the second response option from “I had to wait to see the doctor” to “I had to wait to see a health professional”. Key staff from the Ministry of Health confirmed that other healthcare professionals can appropriately discharge patients in some circumstances.

Another of the response options was modified from “I had to wait for the letter for my GP” to “I had to wait for the discharge letter” because of the issue mentioned in Q65 with family doctors sometimes being the doctor seen in the ED.

Questions 75

Current question

While in the Emergency Department (ED), did you receive or see any information about how to comment or complain about your case?

- Yes
- No
- Don’t know/can’t remember

Action

Deleted this question.

Rationale

This question was removed to shorten the overall questionnaire length. The question was not seen as useful.
Question 77

Current question

Not including the reason you came to the ED, during your visit, or soon afterwards, did you experience any of the following complications or problems?

- An infection
- Uncontrolled bleeding
- A negative reaction to medication
- Complications as a result of tests or procedures
- A blood clot
- A fall
- Any other complication or problem
- None of these

Action

The response categories were changed to:

- An infection
- Uncontrolled bleeding
- A negative reaction to medication
- Complications as a result of tests or procedures
- Severe pain due to the treatment
- A blood clot
- A fall
- Any other complication or problem
- None of these

Rationale

To ensure consistency with other questionnaires, ‘severe pain due to the treatment’ was added as a response option.

Question 86

Current question

Was an interpreter provided when you needed one in the Emergency Department (ED)?

- Yes, always
- Yes, sometimes
- No, I needed an interpreter but one was not provided
- No, I did not need an interpreter

Action

Deleted this question.

Rationale

Due to the very low proportion of people who speak a language other than English at home in rural NSW, this question was deleted.
**Question 88**

**Current question**

What were your reasons for going to the ED? Please *X all the boxes that apply to you*

- [ ] A health professional advised me to go
- [ ] The ambulance crew decided to take me there
- [ ] The GP surgery/practice was closed
- [ ] I couldn’t see a GP within a reasonable time
- [ ] My condition was serious/life threatening
- [ ] The ED provides more complete care
- [ ] My medical history is at the hospital
- [ ] It was cheaper than other options
- [ ] Other

**Action**

The response categories were changed to:

- [ ] My regular doctor/GP was working there
- [ ] A health professional advised me to go
- [ ] The ambulance crew decided to take me there
- [ ] The GP surgery/practice was closed
- [ ] I couldn’t see a GP within a reasonable time
- [ ] My condition was serious/life threatening
- [ ] The ED provides more complete care
- [ ] My medical history is at the hospital
- [ ] It was cheaper than other options
- [ ] Other

**Rationale**

Development work for the 2015 Small and Rural Hospitals Survey identified that many patients know when their family doctor is scheduled to attend the ED as the physician on duty, and go straight to the ED for treatment. Also, patients will often ring their GP surgery first and be told that the doctor is in the ED and go straight there. This question was added to address this issue.

**Question 93**

**Current question**

Data linkage question.

**Action**

Moved from back page (p12) to p11.

**Rationale**

This question had a higher than expected item non-response rate when included on the back of the questionnaire – it was moved to the inside back cover to attempt to reduce this rate.
Review of ‘Emergency Department’ terminology

Small and rural hospitals tend to have emergency care facilities proportional to the size of their local population. Many of the hospitals covered by this survey have emergency care treatment areas that are not recognisable when compared to emergency departments in large metro hospitals. However, through patient focus groups conducted in the development of the Small and Rural Hospitals Patient Survey, BHI was aware that, anecdotally, most rural communities referred to their emergency care centres as ‘emergency departments’.

BHI decided that there were advantages with regards to comparison of surveys if it was possible to continue to use the term ‘emergency department’ in this survey. BHI’s survey team contacted every LHD with rural hospitals to ask about using the terminology of emergency department throughout the survey. Responses were received from all LHDs – this was a universally used term and acceptable for all hospitals for the period of the survey.

Sampling

This survey was sampled from the Health Information Exchange for patients admitted from November 2015 to February 2016 (inclusive). Patients were eligible if they attended an emergency department at a NSW public hospital from peer groups D1a (Community with Surgery), D1b (Community without Surgery), D2 (non-acute) or F3 (Multi-Purpose Service). Peer groups were defined according to NSW Health guidance as of 15 June 2015.

For more information on the inclusion and exclusion criteria for this survey, please review the Technical Supplement for this survey on bhi.nsw.gov.au