

# Development of the Emergency Department Patient Survey 2016-17

## Background

Every 12 months, each annual survey in the NSW Patient Survey Program is reviewed to ensure it is performing appropriately and collecting the information that is intended. In June 2016, the 2015/16 Emergency Department Patient Survey (EDPS) questionnaire was reviewed. This review focused on consistency across reporting periods and only essential changes were made. This document summarises the changes to the EDPS questionnaire from the 2015/16 to 2016/17 survey years.

## Methods

### *Analysis of historic EDPS data*

An analysis of 2015/16 EDPS survey data was undertaken to support the questionnaire review. 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*

Before finalisation of survey changes, recommendations are made and assessed at a number of levels, as follows:

1. Following the aforementioned review, the survey team at BHI compile recommendations to present to the BHI Chief Executive (CE)
2. Following the CE's review, a revised draft questionnaire and summary of changes is provided to the survey program's Strategic Advisory Committee (SAC)
3. When final changes are agreed upon with the SAC and signed off by the BHI CE, the questionnaire is provided to the external contractor for layout in design, printing and mailing.

## Summary of changes for the Emergency Department Patient Survey

The following lists the changes. Rationale and evidence for changes can be found in the following section.

<b>Q number (2015-16)</b>	<b>Question</b>	<b>Change</b>
6	Did the ambulance crew transfer information about your condition to the ED staff?	Deleted
12	Did you experience any of the following issues when in the waiting area?	Underlined 'not' in response option 'No, I did not experience these issues'
13	From the time you first arrived at the Emergency Department (ED), how long did you wait before being triaged by a nurse – that is, before an initial assessment of your condition was made?	Truncated Emergency Department (ED) to ED
45	How clean were the waiting and treatment areas in the ED?	Split into two questions (cleanliness of waiting area and treatment area). Inserted former immediately after Q12 in the 'On Arrival' section
65	Did you receive a copy of a letter from the Emergency Department (ED) doctors to your family doctor (GP)?	Changed question to 'Did the Emergency Department (ED) provide you with a document summarising the care you received (e.g. a copy of the letter to your GP or a discharge summary)?'
68	What were the main reasons for delay?	Changed response category 'I had to wait for the letter for my GP' to 'I had to wait for the discharge letter'
75	While in the Emergency Department (ED), did you receive or see any information about how to comment or complain about your case?	Corrected typographical error, so that 'case' corrected to 'care'
86	Was an interpreter provided when you needed one in the Emergency Department (ED)?	Changed question to 'Did the ED provide an interpreter when you needed one?' and added response category 'I did not need the ED to provide an interpreter'
N/A	Changes to cover letter.	Added survey-specific branding, coloured BHI logo, new subheadings and reordered and edited the text.

## Details of changes

### Question 6

#### Current question

Did the ambulance crew transfer information about your condition to the ED staff?

- Yes, definitely
- Yes, to some extent
- No
- Don't know/can't remember

#### Action

Deleted question.

#### Rationale

This question asks about the interaction between third parties and as such, patients may not have the knowledge to answer it. Furthermore, it is appropriate for ED staff to ask questions of the patient that have already been asked by ambulance crew. There is a risk that this repetition could be interpreted by the patient as a lack of information transfer, making results of this question difficult to attribute to coordination of care, as it is intended to do.

### Question 12

#### Current question

Did you experience any of the following issues when in the waiting area?

- I couldn't find somewhere to sit
- The seats were uncomfortable
- It was too noisy
- It was too hot
- It was too cold
- There were bad or unpleasant smells
- No, I did not experience these issues
- I did not spend time in the waiting area

#### Action

Underlined 'not' in the response category 'No, I did not experience these issues'.

#### Rationale

The item non-response for this question was relatively high at 8.3%. Analysis of multi-response questions in other surveys has also shown a high rate of missing responses, which is reduced by underlining the 'not', thereby highlighting the option to select none of the options. As this question has an additional response category following the 'none' option, there is further need to highlight it.

### Question 13

#### Current question

From the time you first arrived at the Emergency Department (ED), how long did you wait before being triaged by a nurse – that is, before an initial assessment of your condition was made?

- I was triaged immediately
- 1-15 minutes
- 16-30 minutes
- 31-59 minutes
- 1 hour to under 2 hours
- 2 hours or more
- I did not see a triage nurse
- Don't know/can't remember

#### Action

Changed question to include truncated ED text.

#### Rationale

In the 2015-16 EDPS survey, the decision was made whereby the first question on each page that references ED presents this as 'Emergency Department (ED)', while subsequent questions only use 'ED' in order to reduce the length of questions. The exception to this is the overarching performance questions about overall rating of care and whether the patient would speak highly of their Emergency Department experience to their friends and family. As the above question was no longer the first on the page to mention the Emergency Department, the text was truncated to ED.

### Question 45

#### Current question

How clean were the waiting and treatment areas in the ED?

- Very clean
- Fairly clean
- Not very clean
- Not at all clean

#### Action

Split question into two cleanliness questions. One asking about cleanliness of the waiting area and one about the cleanliness of the treatment area.

#### Rationale

Stakeholders requested this split to allow them to compare results to audits and as, in principal, cleanliness of the treatment areas is more critical, but cleanliness of the waiting area may be more prominent for patients as they often spend more time there.

### 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

Changed question to 'Did the Emergency Department (ED) provide you with a document summarising the care you received (e.g. a copy of the letter to your GP or a discharge summary)?'

#### Rationale

This change was made in line with the change to the question in the Adult Admitted Patient Survey 2016, as this question typically receives high rates (>10%) of 'don't know/can't remember' responses. For EDPS 2015-16, the rate was 15%. The change was made in an attempt to clarify this question by providing more detail about the type of information referred to and to address the fact that this information can be provided by email hence, is not necessarily a letter. Finally, the phrase 'discharge letter' is used within the context of NSW Health policy regarding the departure of patients from the ED, so the use of the new version in this survey was considered appropriate.

### Question 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

Corrected typographical error, so that 'case' was changed to 'care' as intended.

#### Rationale

To correct the question.

### 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

Changed question text to 'Did the Emergency Department (ED) provide an interpreter when you needed one?' and changed the last two response categories to 'No' and 'I did not need the ED to provide an interpreter'.

### Rationale

This change was made in order to make the question more targeted to the hospital providing the service, rather than friends or relatives providing interpretation. In this way, the question can be used to assess the performance of the hospital in meeting the needs of patients.

### Changes to cover letter

#### Action

Three main changes to the cover letter were made.

- Addition of survey-specific branding
- Addition of coloured BHI logo
- Addition of new subheadings
- Editing and reordering of the text

### Rationale

International research has demonstrated that succinct text and clear subheadings on a survey cover letter are associated with increased response rates. In addition to this, BHI have worked to create survey-specific branding, so that each survey has its own logo and colour-scheme which is employed across a range of survey products (e.g. questionnaires, posters, reports). With a large increase in the volume of surveys in the NSW Patient Survey Program, this ensures each survey is more easily distinguished from the others.