# Adult Admitted Patient Survey 2023

with virtual care and Aboriginal patient experience modules

**Development Report** 

June 2023



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Please note that there is the potential for minor revisions of this report.

Please check the online version at **bhi.nsw.gov.au** for any amendments or errata.

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The conclusions in this report are those of BHI and no official endorsement by the NSW Minister for Health, the NSW Ministry of Health or any other NSW public health organisation is intended or should be inferred.

# Background

The Bureau of Health Information (BHI) is the statutory agency responsible for reporting on the performance of the NSW public health system.

The Adult Admitted Patient Survey (AAPS) is a core component of the NSW Patient Survey Program, which BHI manages on behalf of NSW Health. Every year this statewide program gives thousands of patients the opportunity to provide feedback about their experiences of care in the healthcare system and subsequent outcomes, using evidence-based, validated survey instruments.

The program provides essential system-wide intelligence about patient experience to strengthen accountability and support improvement. It is the only statewide data asset that delivers robust and representative comparative patient experience information at hospital, local health district (LHD) and state level. It plays a distinct and complementary role alongside current and emergent real-time feedback from patients about their experiences in hospitals, which can inform day-to-day local improvement.

## Review of the Adult Admitted Patient Survey

As part of the NSW Patient Survey Program Strategy 2019–22, BHI reformed the survey program over this period. As well as addressing the timeliness and usefulness of results to inform improvements, BHI reviewed the length and structure of patient surveys to minimise the burden on patients, maximise the value of results and improve response rates.

The new approach involves maintaining a set of core questions (referred to in this report as 'core content'), while introducing 'modules', which are targeted sets of questions that are added to a questionnaire to collect data for a patient group or service. These one-off or periodic modules are designed to meet particular health system needs for additional information.

The AAPS 2023 questionnaire includes two modules. Details about these are provided below. The questionnaire is available on the <u>BHI website</u>.

#### Addition of Virtual Care modules

In response to the COVID-19 pandemic, models of outpatient hospital and primary healthcare across NSW have increasingly involved a mix of in-person and virtual care. Virtual care appointments are held over the telephone or by video call and may use any form of communication or information technologies.

In 2021, a set of virtual care questions was added to the AAPS questionnaire. These questions covered appointments with a public hospital or outpatient clinic only.

In 2022, an expanded two-part module consisting of 13 questions about virtual care experiences in the three months following discharge were included in the AAPS questionnaire from January to June 2022. Patients were invited to complete these questions if they had a virtual care appointment with a hospital outpatient clinic and/or a general practitioner (GP).

In 2023, this two-part module returned to the survey for the period of April to June 2023, to monitor patients' experiences with their continued use of virtual care in hospital outpatient clinic and/or general practitioner (GP) settings.

The virtual care modules complement insights from the core section of the survey, as well as other BHI surveys about experiences with virtual care appointments with NSW public hospitals and GPs. Questions used in the virtual care modules are drawn from the Virtual Care Survey 2021, which was developed by BHI in consultation with stakeholders. Information about the Virtual Care Survey 2021, including the development report, is available on the BHI website.

#### Addition of an Aboriginal patient module

BHI developed an Aboriginal patient module for inclusion in the AAPS 2022 questionnaire. This module was developed to support the Centre for Aboriginal Health (CAH) in monitoring and improving the experience of Aboriginal patients in NSW public hospitals.

This 11-question module is provided to patients who have identified as being of Aboriginal and/or Torres Strait Islander background in hospital administrative data. The Aboriginal patient module is included in the AAPS questionnaire from January to December 2023.

The Aboriginal Patient Experience Question Set, developed in 2020, forms the basis for the Aboriginal patient module ('Your experience as an Aboriginal patient'). BHI developed the question set in collaboration with CAH, the Aboriginal Patient Experience Survey Program Advisory Committee and other key stakeholders from across the NSW health system. It aims to better support survey data collection for Aboriginal patients using a set of questions that are of high relevance to Aboriginal patients, the Aboriginal community and other relevant stakeholders.

The selection of questions for this module was guided by:

- evidence and feedback about aspects of experiences and outcomes that are particularly important to Aboriginal patients, and to those responsible for providing care and making policy
- the need to generate meaningful information to enable sound analysis and interpretation
- the need for the module to be short in length and straightforward for respondents to complete.

Information about the Aboriginal Patient Experience Question Set, including the development report, is available on the <u>BHI website</u>.

# Overview of changes

No changes were made to core AAPS questionnaire content.

The content of modules returning to the survey are outlined in separate tables below:

- Virtual care with a hospital outpatient clinic
- Virtual care with a general practitioner

The content of the ongoing module, which was modified, is outlined in a separate table below:

- Your experience as an aboriginal patient

## Module – Virtual care with a hospital outpatient clinic

The 'Virtual care with a hospital outpatient clinic' module was returned to the survey to gain insights into patients' experiences of virtual care appointments with a hospital outpatient clinic in the three months following discharge.

Question numbers are not included for this module as they will change depending on which modules are included in the survey.

#### Question/section

(as it appears in 2023 questionnaire)

#### VIRTUAL CARE WITH A HOSPITAL OUTPATIENT CLINIC

Virtual care appointments are held over the telephone or by video call, using any form of communication or information technologies, rather than in person. For the questions in this section, please think about your virtual care appointments with a <u>hospital outpatient clinic</u>, not with a general practitioner (GP), <u>in the three months after your discharge</u>.

In the three months after your discharge from the hospital, how many in-person appointments have you had with a hospital outpatient clinic?

- None
- 1 to 2
- 3 to 5
- More than 5
- Don't know/can't remember

In the three months after your discharge from the hospital, how many virtual care appointments have you had with a hospital outpatient clinic?

- None... Go to QXX
- 1 to 2
- 3 to 5
- More than 5
- Don't know/can't remember

#### Question/section

#### (as it appears in 2023 questionnaire)

Overall, how would you rate the virtual care you received?

- Very good
- Good
- Neither good nor poor
- Poor
- Very poor

Did the care and treatment received through virtual care help you?

- Yes, definitely
- Yes, to some extent
- No

Compared with in-person appointments, were your virtual care experiences...?

- Better
- About the same
- Not as good

If given the choice, would you use virtual care again?

- Yes, definitely
- Yes, in some circumstances
- No
- Don't know

#### Question/section

#### (as it appears in 2023 questionnaire)

Thinking about your experiences of virtual care, what have been the benefits for you?

Please X all the boxes that apply to you

- I thought it was convenient
- I saved time
- I saved money
- I felt that I received safe, high quality care
- I felt that I received the right care at the right time
- I felt at ease being in my own home/surroundings
- I didn't have to take as much time off work as I would have with an in-person appointment
- I didn't need to arrange care for children or dependants
- I was able to have others join the appointment (my family, other members of my healthcare team)
- I thought it benefitted me in other ways
- I had no benefits

How did you access your most recent virtual care appointment?

- Telephone, audio only (mobile or landline)
- Online, with video (e.g. Skype, Zoom. On any device including computer, tablet or smartphone)
- Online, audio only (on any device including computer, tablet or smartphone)
- Other

## Module – Virtual care with a general practitioner

The 'Virtual care with a general practitioner' module was returned to the survey to gain insights into patients' experiences of virtual care appointments with general practitioners (GPs) in the three months following discharge.

Question numbers are not included for this module as they will change depending on which modules are included in the survey.

#### Question/section

(as it appears in 2023 questionnaire)

#### VIRTUAL CARE WITH A GENERAL PRACTITIONER

For the questions in this section, please now think about your virtual care appointments with a general practitioner (GP), in the three months after your discharge.

In the three months after your discharge from the hospital, how many in-person appointments have you had with a general practitioner (GP)?

- None
- 1 to 2
- 3 to 5
- More than 5
- Don't know/can't remember

In the three months after your discharge from the hospital, how many virtual care appointments have you had with a GP?

- None... Go to QXX
- 1 to 2
- 3 to 5
- More than 5
- Don't know/can't remember

Overall, how would you rate the virtual care you received?

- Very good
- Good
- Neither good nor poor
- Poor
- Very poor

#### Question/section

#### (as it appears in 2023 questionnaire)

Did the care and treatment received through virtual care help you?

- Yes, definitely
- Yes, to some extent
- No

Did the opportunity to use virtual care help ensure that your care was well coordinated between the hospital and the GP?

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

## Module – Your experience as an Aboriginal patient

The Aboriginal patient module ("Your experience as an Aboriginal patient") is provided to patients who have identified as being of Aboriginal and/or Torres Strait Islander background in hospital administrative data.

Minor changes were made to the 2023 iteration of the module, following a review of the data from 2022.

Question numbers are not included for this module as they will change depending on which modules are included in the survey.

Updated question/section (as it appears in 2023 questionnaire)	Change from 2022	Rationale
If your family visited you in hospital, did they have any of the following issues? Please X all the boxes that apply to you  There were cost issues (e.g. travel, accommodation, parking)	Modified response order  The response option of 'They didn't have any issues' was moved from the fifth option to seventh option, above 'Other issue'	Upon data review, a high number of respondents skipped this question. The re-ordering of the response options aims to reduce missing response options.
Visiting times or visitor numbers were restricted		
<ul> <li>There was no culturally appropriate space available</li> </ul>		
<ul> <li>My family didn't feel comfortable when they visited me in hospital</li> </ul>		
I had no family visit me in hospital		
Don't know/can't remember		
They didn't have any issues		
Other issue     Please write below.		

Updated question/section (as it appears in 2023 questionnaire)	Change from 2022	Rationale
What happened to make you feel you were treated unfairly?	Changed response options  The two response options 'I heard the staff say something bad about me' and 'I heard the staff say something bad about Aboriginal people' were merged into 'I heard the staff say something bad about Aboriginal people'	This change were made following feedback from respondents that there were too many response options.
Please X all the boxes that apply to you		
<ul> <li>The staff were less respectful with me than other patients (e.g. the way they spoke to me, the way they looked at me)</li> </ul>		
I heard the staff say something bad about me		
<ul> <li>I heard the staff say something bad about Aboriginal people</li> </ul>		
The staff kept me waiting longer than other patients		
<ul> <li>The staff didn't spend as much time with me compared with other patients</li> </ul>		
I don't think my cultural needs were recognised		
Other reason     Please write below.		
Why didn't you go to hospital?	Changed response options  The two response options of 'I was too busy with work' and 'I was too busy with personal or family responsibilities were merged into 'I was too busy with work, personal or family responsibilities'	This change were made following feedback from respondents that there were too many response options.
Please X all the boxes that apply to you		
I had transport issues		
<ul> <li>I was too busy with work, personal or family responsibilities</li> </ul>		
I had a previous experience of discrimination		
The staff or service were not culturally appropriate		
In the past, my health issues weren't taken seriously		
Other reason Please write below.		