

Patient Perspectives

Exploring experiences of hospital care for people with disability

Adult Admitted Patient Survey 2015



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State Health Publication Number: (BHI) 170560
ISBN 978-1-76000-731-7 (print); 978-1-76000-732-4 (online).

Suggested citation:

Bureau of Health Information. *Patient Perspectives – Exploring experiences of hospital care for people with disability, Adult Admitted Patient Survey 2015*. Sydney (NSW); BHI; 2017.

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Published October 2017

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.

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Foreword

The Bureau of Health Information (BHI) each year distributes about 250,000 questionnaires to patients in the New South Wales (NSW) public healthcare system. Our patient survey program collects and analyses data on experiences and outcomes of care from a range of groups, including Aboriginal patients, emergency department patients, maternity patients and people with cancer. This report adds to that body of work – examining, for the first time, the experiences of hospital care among patients with disability.

People with disability are a diverse group, differing greatly in health and functional status. While some in the group have heightened healthcare needs, this is not always the case. To start to explore whether health needs and expectations are being met, we analysed the results of our 2015 Adult Admitted Patient Survey, identifying differences in the experiences of patients with and without a self-reported disability.

Our 'disability' cohort consisted of respondents with any of five longstanding conditions: severe hearing impairment, severe sight impairment, learning disability, longstanding physical condition or neurological impairment. The analysis found that patients with these conditions responded less positively to most survey questions, highlighting differences in experiences across all aspects of care – including accessibility, communication, engagement and patient-reported outcomes.

This edition of *Patient Perspectives* provides important insights, however the work has some limitations. The disability cohort was identified by a single survey question about longstanding conditions, disability or impairments. There was no question about the effect of any disability on patients' daily lives and therefore we were unable to look for associations between functional limitations and patient experiences. This means the disability group could include patients who are only minimally impacted by their longstanding condition as well as patients who are profoundly affected. Therefore, the report's findings may underplay the effect of severe disability on patient experiences.

The report represents a starting point from which we can build a more sensitive and comprehensive survey that fully describes the experiences of hospital care among patients with disability. It is an important addition to BHI's reporting and aligns with wider efforts to identify and respond appropriately to the needs of people with disability across the state. It has been strengthened by advice from the multi-agency steering committee overseeing the implementation of the statewide Disability Inclusion Action Plan (DIAP), which includes consumer and carer representatives.

Capturing and amplifying the voices of people with disability will help to deliver better health outcomes for patients. The way that care is provided to vulnerable groups in our community provides a barometer of performance – reflecting what is best in the healthcare system and highlighting opportunities to improve both at a local and system level.

Dr Kim Sutherland

Acting Chief Executive, Bureau of Health Information

Key findings

10 key findings

- 1 Overall, a majority of admitted patients rated hospital care highly.** Over three quarters (76%) of patients with disability said they would 'speak highly' about their hospital experience, and 79% of patients without disability did so.
- 2 For 26 of the 48 survey questions included in this report, patients in the disability group were significantly less positive than other patients.** There were no survey questions which were answered significantly more positively by patients in the disability group.
- 3 Almost three-quarters of patients in the disability group said that the hospital care they received 'definitely' helped them.** However, there was a six percentage point gap in responses between patients with and without disability (74% and 80%).
- 4 Most patients in the disability group said that they did not experience unfair treatment (93%), their family was given the right amount of information (77%), they had confidence and trust in doctors (79%), and they were treated with respect (85%).** However, their responses were significantly less positive than other patients for all four of these questions.
- 5 A sizeable proportion of patients in the disability group highlighted specific aspects of care that could be improved.** For example, 16% were not given contact information for support after discharge; 17% were not given enough information about their condition; 23% did not get enough help from staff to eat their meals; and 25% said nurses, and 28% said doctors, did not always explain things in an understandable way.
- 6 Within local health districts, the number of questions with significant gaps between the responses from the disability group and other patients ranged from zero to 12.** In Far West, Mid North Coast and St Vincent's Health Network, there were no questions with significant gaps, while in Southern NSW, responses from patients with disability were significantly less positive than patients without disability for 12 of the 48 survey questions.
- 7 When focusing on the experiences of patients within the disability group only, local health district results varied.** Responses from patients with disability in Mid North Coast and Southern NSW were significantly more positive than the NSW result for 17 of the 48 survey questions. Patients with disability in Western Sydney and Nepean Blue Mountains were significantly less positive for 14 and 13 questions, respectively.
- 8 Among patients with a single disability, those with hearing impairment were most positive about their care.** Those with a neurological condition were least positive.
- 9 Patients with multiple disabilities responded less positively than those with a single disability.** Disability conditions appear to have a cumulative and negative effect on patient experiences.
- 10 Supplementary analyses showed patients with a mental health condition and those with longstanding illnesses such as cancer also had less positive experiences than other patients.** These groups had less positive experiences for 40 and 13 of the 48 survey questions respectively when compared with patients with no mental health conditions and no longstanding illnesses.

Summary

This edition of *Patient Perspectives* explores the experiences of 28,391 adults who were admitted to a NSW public hospital during 2015. It compares survey responses from the 8,984 patients who said they had a 'disability condition' (hearing impairment, vision impairment, longstanding physical condition, learning disability or neurological impairment) with the 19,407 patients with none of those conditions, a longstanding illness or a mental health condition.

The analysis is based on the responses to 48 questions from the 2015 Adult Admitted Patient Survey (AAPS), which was sent to 73,864 patients approximately three months after their discharge from one of 80 NSW public hospitals. The AAPS response rate was 42%.

The report comprises three sections:

- **Section 1** is based on 15 thematic areas that cover overall experience, aspects of care and patient-reported health outcomes.
- **Section 2** provides a synthesis of results at the local health district (LHD) and the hospital level.
- **Section 3** includes NSW results for patients with a single disability condition compared with patients with multiple conditions. It also provides supplementary analyses regarding patient experiences among those with longstanding conditions such as cancer or diabetes, and those with mental health conditions.

Section 1: Thematic analyses

Almost all patients with disability rated the care they received in hospital as either 'very good' (63%) or 'good' (30%). While a similar percentage of patients without disability rated hospital care overall as 'very good' (66%), for 26 of the 48 survey questions analysed in this report, patients with disability were less positive than those without. There were no questions for which patients in the disability group answered significantly more positively than other patients.

Looking across the various aspects of care addressed in the survey, patients with disability responded most positively to questions about respectful care, although in comparison, patients without disability responded even more positively.

Among patients with disability, 85% said they were 'always' treated with respect and dignity; 86% said they were 'always' given enough privacy; and fewer than one in 10 (7%) reported unfair treatment.

In terms of self-reported outcomes, most patients in the disability group answered positively, however a smaller proportion (74%) said care and treatment 'definitely' helped them when compared with other patients (80%). A similar difference was seen in the percentage of patients who said they experienced a complication during or shortly after their hospital stay (19% for the disability group and 14% for other patients).

In general, questions about directly observable elements of care such as cleanliness, safety and hygiene were answered similarly by patients with and without disability. In contrast, for questions that focused on interpersonal or relational aspects of care – such as coordination of care, engaging patients in decision-making about their care, respectfulness of staff and understandable communication – there were significant differences between responses from patients with and without disability.

There are a number of results that highlight areas for improvement, for example:

- 16% of patients with disability said they were not given contact information for support after discharge (other patients 13%).
- 17% of patients said that during their hospital stay, not enough information was given to them about their condition or treatment (other patients 13%).
- 23% of patients with disability who needed help to eat their meals said they did not get enough help from staff (other patients 20%).

Analyses that focus only on responses from patients in the disability group reveal significant variation across LHDs and hospitals and highlight potential for improvement in providing care to people with disability.

Section 2: Overview of local health district results

Comparing responses from patients with and without disability

At an LHD level, results are reported in terms of significant gaps between responses from patients with and without disability. In Far West and Mid North Coast LHDs and St Vincent's Health Network, there were no questions with significant gaps.* In contrast, in Southern NSW, responses from patients with disability were significantly less positive than patients without disability for 12 of the 48 survey questions. Notably, patients without disability in Southern NSW responded more positively than those without disability in other districts, resulting in more significant gaps within Southern NSW.

Comparing responses of patients with disability – individual LHDs and hospitals compared with NSW

Focusing only on the responses from patients with disability, a synthesis of the survey results reveals those LHDs and hospitals that were more successful at meeting the challenges of providing care to this group.

At an LHD level, responses from patients with disability in Mid North Coast and Southern NSW were significantly more positive than the NSW result for 17 of the 48 survey questions. Patients in Western Sydney and Nepean Blue Mountains were significantly less positive for 14 and 13 questions, respectively.

At a hospital level, responses from patients with disability were significantly more positive than the NSW result in Kurri Kurri (32 questions) and Macksville (24 questions). Patients were significantly less positive in Blacktown (18 questions) and Nepean (17 questions) hospitals.

* Both Far West and St Vincent's have a small sample size and there is limited statistical power to detect significant differences.

Section 3: Single and multiple disability and other longstanding conditions

The disability group in this report includes patients with a single condition as well as those with multiple conditions. A separate analysis of survey responses shows that there are differences between the two groups. Disability conditions appear to have a cumulative and negative effect on patient experiences. Patients with multiple disabilities responded less positively than those with a single disability.

Patients with a mental health condition (e.g. depression) are not included in the disability group. Mental health conditions can, however, have a profound effect on health and wellbeing for many patients. A separate analysis of survey responses from admitted patients with and without a self-reported mental health condition showed significant differences in their experiences across all aspects of care. Patients with a mental health condition were significantly less positive for 40 of the 48 survey questions. The widest gap was seen in the percentage who said doctors 'always' knew enough about their medical history (60% of patients with a mental health condition and 72% of patients without a mental health condition).

Similarly, patients who self-reported a longstanding illness (e.g. cancer, HIV, diabetes or chronic heart disease) are not included in the 'disability' cohort in this report. In this analysis, there were 13 questions to which patients with a longstanding illness answered significantly less positively than patients without a longstanding illness. There were also three questions to which those with a longstanding illness answered significantly more positively.

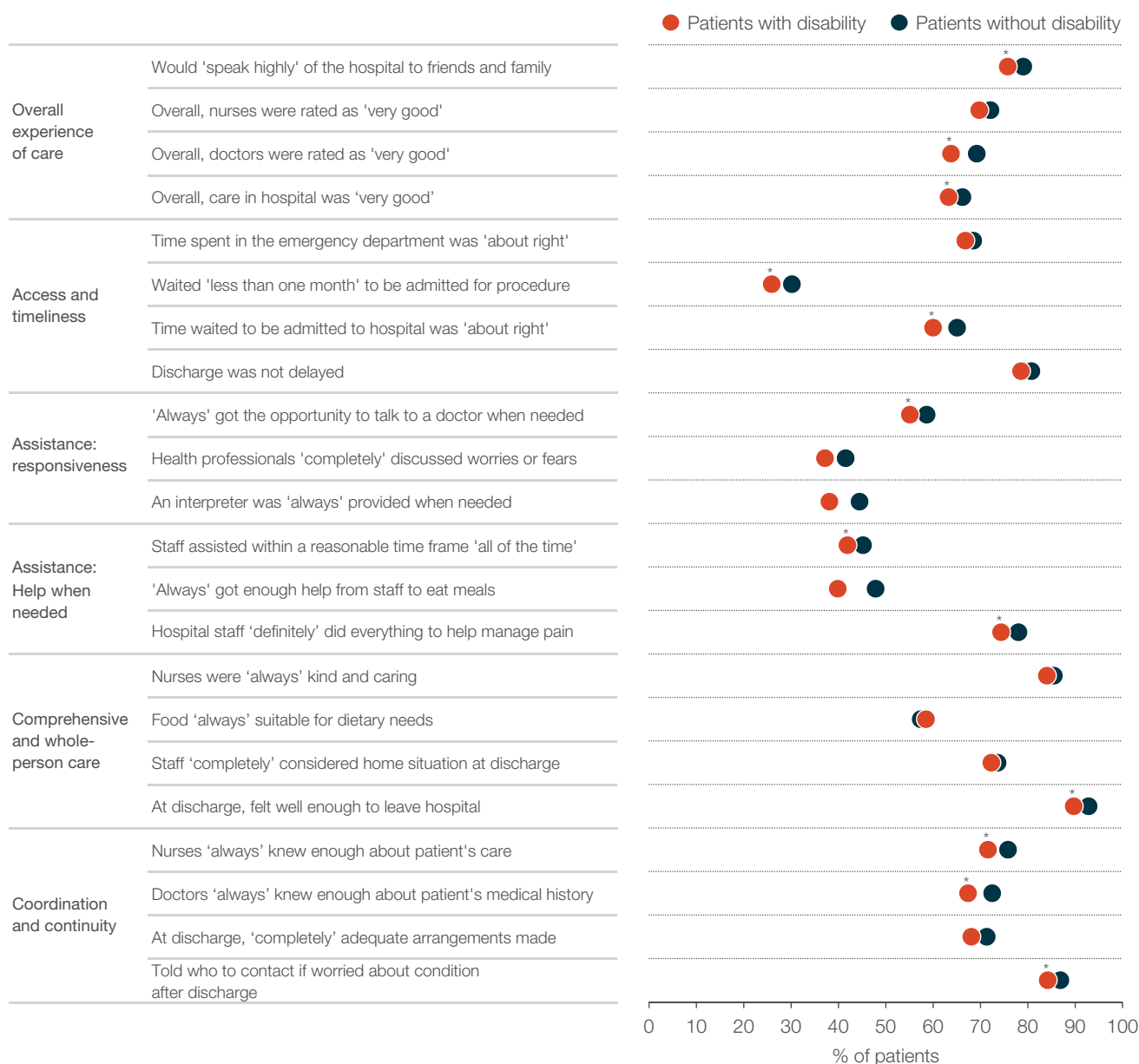
Results at a glance

Experiences of patients with and without disability

An overview of the survey results at a NSW level is provided by comparing the proportion of patient responses in the most positive or 'top category'. For over half of the questions featured in this report

(26 out of 48 questions), patients with disability responded significantly less positively than those with none of the five conditions (Figure 1). There were significant differences between the groups

Figure 1 Results for all questions, percentage reporting the most positive response: Patients with and without disability, by aspect of care, NSW, 2015



*There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

for questions that focused on coordination of care, engaging patients in decision-making about their care, respectfulness of staff and understandable communication. There were no significant differences for questions on safety and hygiene, politeness and courtesy of staff or the physical environment.

There were no questions to which patients in the disability group responded significantly more positively. On average, responses from patients with disability were 3.1 percentage points lower than those without disability.



*There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

Setting the scene

About this report

Introduction

According to the Australian Bureau of Statistics (ABS), almost two in 10 people in NSW are living with disability (18% or 1.4 million people). A further two in 10 (22%) have a long-term health condition but no disability, while the remaining 60% have neither disability nor a long-term health condition.¹

Nationally and statewide, there are extensive efforts to improve care provided to people with disability. However, little is known about the experiences of healthcare among people with disability.

It is important to measure these experiences for two main reasons. First, patients are key informants who can reflect upon the quality of care. Second, patient experiences are linked to important intermediate outcomes such as adherence to treatment and heeding post-discharge advice. These in turn influence patients' outcomes and recovery.

Survey data are particularly valuable in the assessment of four key performance dimensions:

Accessibility: Whether patients' needs were met; and how easy it was for them to obtain healthcare.

Appropriateness: Whether evidence-based services were provided to patients in a technically proficient and safe way; and whether services were responsive to their needs and expectations.

Effectiveness: Whether healthcare services improved patients' health without causing undue harm.

Equity: Whether healthcare was provided without discrimination on the basis of gender, age, race or other demographic factors.

NSW key policy and context documents

The Disability Inclusion Action Plan (DIAP) sets out the high-level vision and objectives of disability inclusion for the NSW health system.^{2,3,4}

The NSW Health policy document *Responding to Needs of People with Disability during Hospitalisation* describes the responsibilities of staff working in

Defining disability

Definitions of disability differ across data collections and contexts.

The **Australian Bureau of Statistics (ABS) 2015 Survey of Disability, Ageing and Carers** defines a person as having a disability if they report a limitation, restriction or impairment which has lasted, or is likely to last, for at least six months and restricts everyday activities. The **Australian Institute of Health and Welfare (AIHW)** datasets use a disability 'flag' derived from a standard set of questions that assess a person's level of functioning and need for support in everyday activities.

In NSW, many data collections adopt a definition based on the **World Health Organization's International Classification of Functioning, Disability and Health**.⁵ This classification uses 'disability' as an umbrella term for the following:

- impairments – problems in body function or structure
- activity limitations – difficulties in executing activities
- participation restrictions – problems an individual may experience in involvement in life situations.

The **NSW Disability Inclusion Act 2014** refers to long-term physical, psychiatric, intellectual or sensory impairments that, in interaction with various barriers, may hinder the person's full and effective participation in the community on an equal basis to others. To participate in the **National Disability Insurance Scheme** a person must be under 65 years of age and have a permanent impairment or condition that significantly affects their ability to take part in everyday activities, or have a developmental delay.

hospitals when caring for patients with disability.⁶ It requires NSW Health organisations and staff to provide services to people with disability that are inclusive, person-centred and accessible. Health service staff must make reasonable adjustments according to the needs of the individual with disability, communicate with and provide information to them in a way they understand, and involve them, and where appropriate, consult their carer, family, guardian and/or disability support staff in their care.

NSW Patient Survey cohort definition

The Adult Admitted Patient Survey (AAPS) asks patients: *Which, if any, of [seven] longstanding conditions do you have?* Respondents who indicated they had any of the following conditions were included in the disability group: deafness, blindness, a longstanding physical condition, a learning disability or a neurological condition (Table 1).

Two of the seven options were not included in the disability group. The longstanding illness category is diverse, including cancer, HIV, diabetes and chronic heart disease patients. Many of these patients are not considered to have disability. Similarly, while mental illness can be disabling for some patients, many do not consider themselves to have a disability. Further, the AAPS sampling frame excludes patients who were admitted to hospital for any psychological-related reason, therefore the sample is not representative of the overall patient population with a mental health condition.

After consultation with mental health specialists and consumers, mental health conditions were excluded from the disability group. Responses from patients with a self-reported longstanding illness or mental health condition were analysed separately.

Altogether, 28% of AAPS respondents in 2015 said they had at least one of the five disability conditions. This percentage varied across local health districts (LHDs) (from 23% to 39%) and across hospitals (from 7% to 49%) (See Appendices 1 and 2).

Compared with people without disability, people with disability are known to be older, in poorer health, have a higher unemployment rate, a lower rate of tertiary education and are more socioeconomically disadvantaged.^{1,7,8,9}

The results presented in this report are not adjusted for variation in socio-demographic characteristics. Sensitivity testing that explored the impact of not adjusting the data are available in the Technical Supplement. For information on variation in socio-demographic characteristics between patients with and without disability, see Table 2 (page 14).

For more information and detailed results, visit BHI's interactive data portal Healthcare Observer:
bhi.nsw.gov.au/healthcare_observer

Table 1 NSW Patient Survey longstanding conditions used in disability groupings

Patients with disability	%	n	Patients without disability	%	n
Deafness or severe hearing impairment	12	3,997	A longstanding illness (e.g. cancer, HIV, diabetes)	25	7,320
Blindness or severe vision impairment	3	1,087	A mental health condition (e.g. depression)	9	2,616
A longstanding physical condition	17	5,097	None of the longstanding conditions listed in the survey	48	12,744
A learning disability	2	486	Missing (no response option was selected)	5	1,524
A neurological condition (e.g. Alzheimer's)	3	908	Total patients without disability	72	19,407
Total patients with disability	28	8,984			

Notes: In some jurisdictions, the term 'intellectual disability' is used instead of learning disability. Respondents could select multiple options therefore totals are not the sum of column values.

Data and methods

Data source

All results are based on responses to the Adult Admitted Patient Survey 2015 (AAPS). Respondents can complete the survey on paper, online, or in other languages with the assistance of a phone operator. The survey can be completed by the patient, the patient with help from someone else, or by someone else on behalf of the patient. The surveys are mailed out approximately three months after patients are discharged from hospital.

Sample

Surveys were mailed to a random sample of 73,864 people aged 18+ years who were admitted to a NSW public hospital between January and December 2015. The overall weighted response rate was 42%. At the local health district level, this ranged from 34% to 49%; and at the hospital level from 28% to 62%. The sampling frame included public facilities with a hospital peer group of A1, A3, B, C1 and C2 (i.e. principal referral, major and district hospitals). Each eligible hospital was sampled separately. When calculating sample size targets, the expected response rate was taken into account. The sample selected was proportional to the facility patient numbers recorded in strata between January 2015 and December 2015: Age (18–49, 50+ years); and stay type (same-day, overnight).

Analysis

Survey responses were analysed using the SURVEYFREQ procedure in SAS v9.4 to obtain the percentage of patients who selected each response category. Percentages generally exclude missing values and responses of 'don't know' or 'not sure' unless otherwise stated. The survey sample was weighted to adjust for differences in the probabilities of selection among respondents. Post-stratification weights were used to reduce the effect of differing non-response rates among different age groups on the survey estimates. These weights were adjusted for differences between hospitals, and admitted and non-admitted patients.

Differences between groups were assessed by a 95% overlapping confidence interval method to identify differences that reach statistical significance. Two types of comparisons were made. First, results were reported at a NSW level for the disability group (patients who self-reported having a hearing impairment, vision impairment, neurological condition, physical condition or learning disability) compared with patients who did not self-report one of the five disability conditions. Second, differences were assessed for the disability group – each LHD and hospital result for the disability group was compared with the disability group for all of NSW.

Sensitivity analyses

The profile of patients with disability differed from that of patients without disability on a number of socio-demographic and health variables (Table 2).

Patient characteristics such as age, education and health status can influence patient experience. In order to assess the effect these factors might have had on results, a sensitivity analysis was undertaken. Results adjusted for age, education and socioeconomic status (SES) were compared with unadjusted results. The analyses showed that after adjusting for these variables, patients in the disability group were significantly less positive than other patients for more survey questions. The results in this report are, therefore, conservative. A further sensitivity analysis was undertaken to compare the type of disability by LHD. The analysis showed that there were minimal differences at an LHD level when compared with NSW.

Reporting

Results are reported for NSW, LHDs and hospitals. Results based on fewer than 30 respondents are not reported (Appendix 1). Full details about sampling, missing values, analysis and reporting can be found in the Technical Supplement: Adult Admitted Patient Survey 2015.

Colour coding is used to show statistically significant differences in figures and graphs. Green denotes results that are significantly more positive than the NSW result. Red denotes results that are significantly less positive than the NSW result. Where there are small numbers of respondents, power to detect differences between hospital and NSW results is reduced.

Unless otherwise specified, differences between groups are discussed only when a statistically significant difference was detected.

Limitations

Not all longstanding conditions result in limitations or impairments. One report from the UK estimated that about one-third of patients who said they had a longstanding condition did not feel it limited them.¹⁰ Further, it showed that patients who report being limited by their condition have less positive experiences than those who do not. It is not possible using the AAPS survey to assess the extent to which people are limited by their conditions, and this group is likely to be smaller and have less positive experiences than the disability group used in this report.

The survey questionnaire was not adapted to explore issues of specific importance to patients with disability and the sample was not selected to be representative of people with disability. However, the report seeks to highlight differences between experiences of care for patients with and without disability using the standard adult admitted patient questionnaire.

Sensitivity testing of the overlapping confidence interval method, which is used to detect statistically significant differences, found this method to be conservative. Therefore, there may be some underestimation of associations between disability and patient experiences.

While the survey was mailed to a random sample of admitted patients, whether or not a patient completes a survey can be influenced by a variety of factors such as their age, gender, socioeconomic status, remoteness of their residence and characteristics of their hospitalisation.

Table 2 Socio-demographic characteristics of patients, by patients with and without disability, NSW, 2015

		Patients with disability (%)	Patients without disability (%)	Percentage point difference
Age	18-34	3	11	-8
	35-54	12	24	-12
	55-74	40	40	0
	75+	44	25	19
Highest level of education completed	University degree/s	10	19	-9
	Less than Year 12	49	38	11
In general, how would you rate your health?	Excellent	3	13	-10
	Poor	12	3	9
Language mainly spoken at home	English	93	88	5
	Other language	7	12	-5
Quintile of disadvantage	1: Most disadvantaged	23	20	3
	5: Least disadvantaged	9	12	-3

Navigating the report

The report is based on patient responses to 48 survey questions. Results are presented in three sections:

Section 1 is based on 15 thematic areas that cover overall experience, aspects of care and patient-reported health outcomes (Table 3).

For each of these themes, the report presents:

- Results for NSW with responses from patients with disability compared with other patients.
- Among patients with disability only, variation in survey responses across LHDs and hospitals (most positive response category).

Section 2 provides a synthesis of results at the LHD and hospital levels.

Section 3 provides NSW results for single compared with multiple disability conditions. It also provides results for patients with self-reported mental health conditions and longstanding illnesses such as cancer or diabetes.

Table 3 Themes in this report

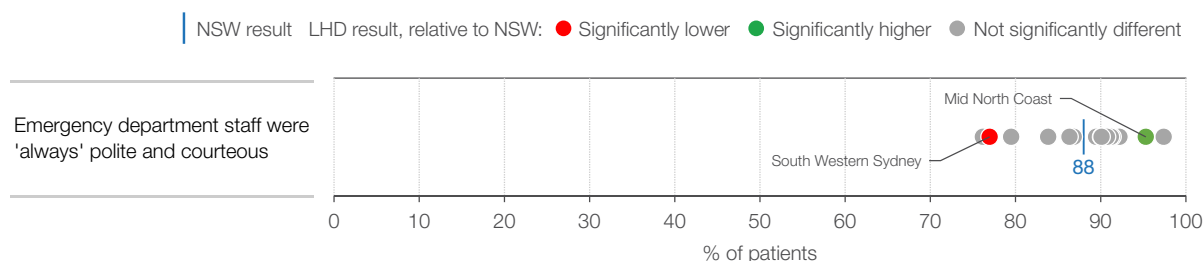
Aspect of Care	Question themes
Overall experience	Overall ratings and reflections about the way that patients would describe their hospital stay to friends and family.
Access and timeliness	How long patients wait for various stages of care and whether they consider these times to be acceptable.
Assistance: Responsiveness	Whether staff respond to patients' emotional needs and provide assistance when needed.
Assistance: Help when needed	Whether staff respond to patients' physical needs and provide assistance when needed.
Comprehensive and whole-person care	Whether healthcare professionals consider all needs of a person, including their specific circumstances and needs beyond the medical treatment of their condition.
Coordination and continuity	Whether care is well-organised and integrated; whether care is provided without undue disruption.
Engagement and participation	Whether the patient and where appropriate, their family or carer, are involved in decisions about their treatment and care.
Provision of information	Whether patients receive important information; and whether enough information was provided to them, their families or carers.
Respect and dignity	Whether patients' values and beliefs are honoured and patient privacy is protected.
Politeness and courtesy	Whether staff are courteous and polite.
Understandable communication	Whether staff communicate in a clear and understandable way.
Confidence and trust	Whether patients feel assured that the staff treating them are capable and dependable and can be relied upon.
Safety and hygiene: Physical amenities	Cleanliness of wards and bathrooms.
Safety and hygiene: Processes of care	How well staff comply with clinical safety practices and hygiene guidelines.
Patient-reported outcomes	Whether in the weeks following discharge, patients were readmitted, had to visit an emergency department or experienced a complication; the extent to which patients were helped by the care they received.

Interpreting the graphs

Example 1.1: A 'string of pearls' graph is used to show the distribution of LHD results and highlight differences from the NSW result.

Each circle represents an LHD's result, in this case for the disability group, and highlights whether it is significantly different from the NSW result for the disability group, shown by the blue line.

Example **Trust and confidence, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015**

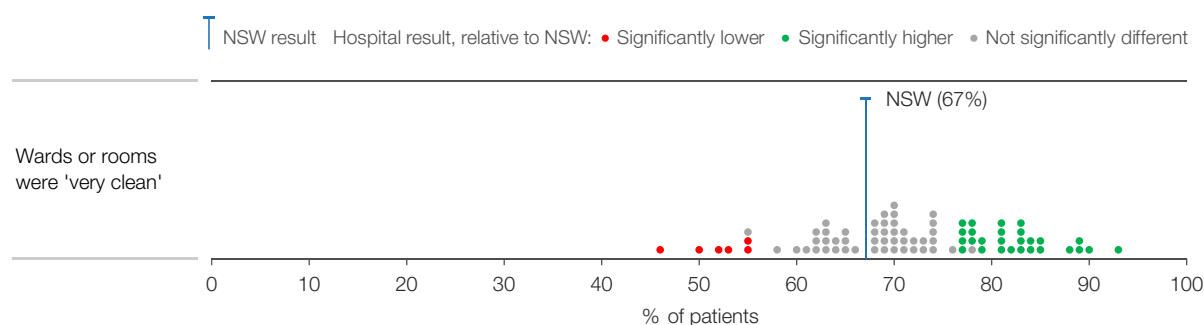


Example 1.2: 'Dot plots' show the distribution of results for hospitals and highlight differences from the NSW result.

This example shows dot plots for responses to two survey questions, by hospital, for the disability group. Each plot shows the number of hospitals, by the percentage of their patients with disability who

gave the response 'shown in inverted commas' (usually this is the most positive response category). Each circle shows a hospital's result and highlights whether it is different from the NSW result (the blue line). Individual hospital results are provided in Section 2.

Example **Assistance, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015**



SECTION 1

Thematic analyses

Overall experience of care

Most patients with disability reflected positively on their experiences of care, although they were less positive than other patients

While the majority of all patients rated care highly, comparisons between patients with and without disability show significantly less positive responses from the disability group in the percentage who said: the doctors who treated them were ‘very good’ (64% and 69%); they would ‘speak highly’ of their hospital experience (76% and 79%); and the care they received in hospital was ‘very good’ (63% and 66%) (Figure 1.1).

Among patients with disability, responses from those admitted to a hospital in Mid North Coast LHD were significantly more positive than the NSW result for all four questions. Responses from patients with disability admitted to a hospital in Western Sydney and Illawarra Shoalhaven LHDs were less positive than the NSW result for two of the four questions (Figure 1.2).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who rated doctors as ‘very good’ (a 48 percentage point range, 43% to 91%) (Figure 1.3).

Figure 1.1 Overall experience of care, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015



*There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

Figure 1.2 Overall experience of care, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

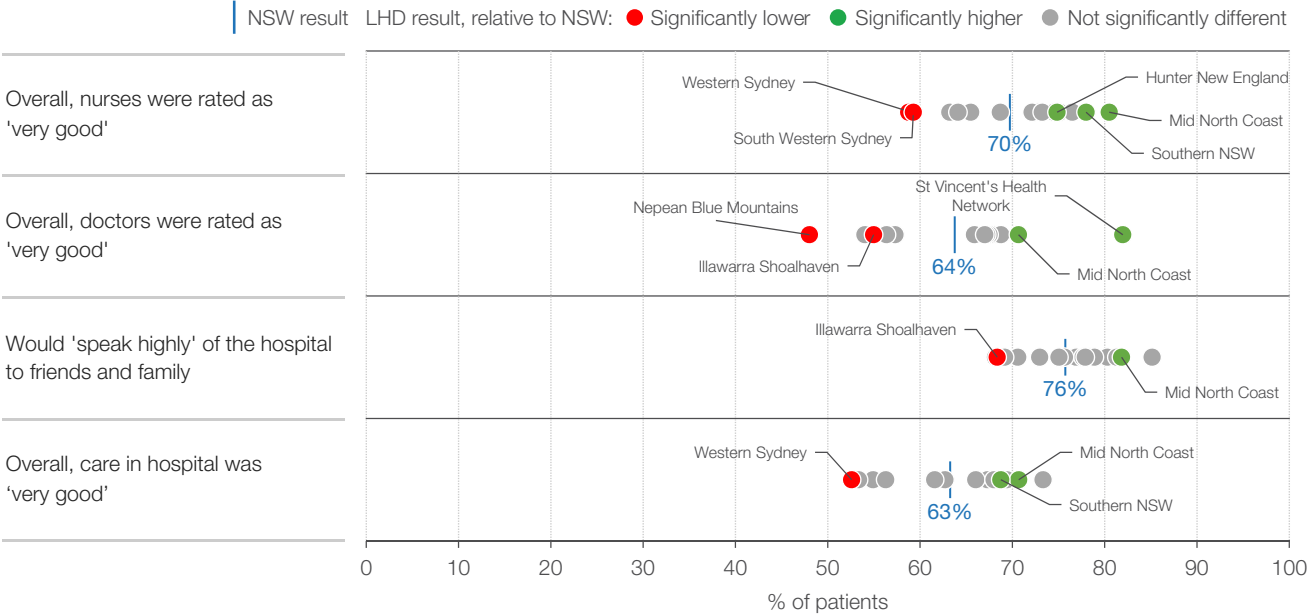
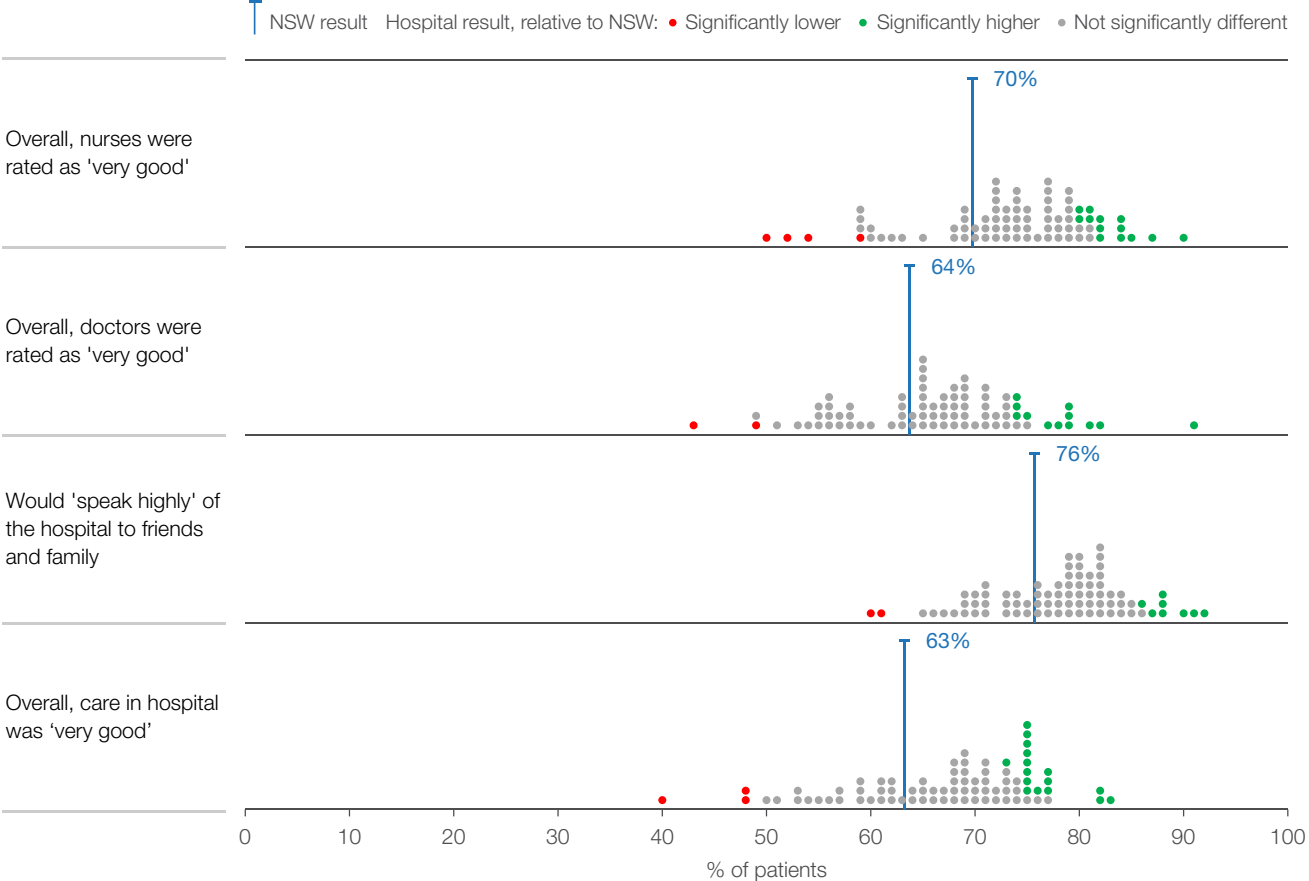


Figure 1.3 Overall experience of care, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Access and timeliness

Across hospitals, the percentage of patients with disability who said the time they spent in the ED was 'about right' ranged from 32% to 97%

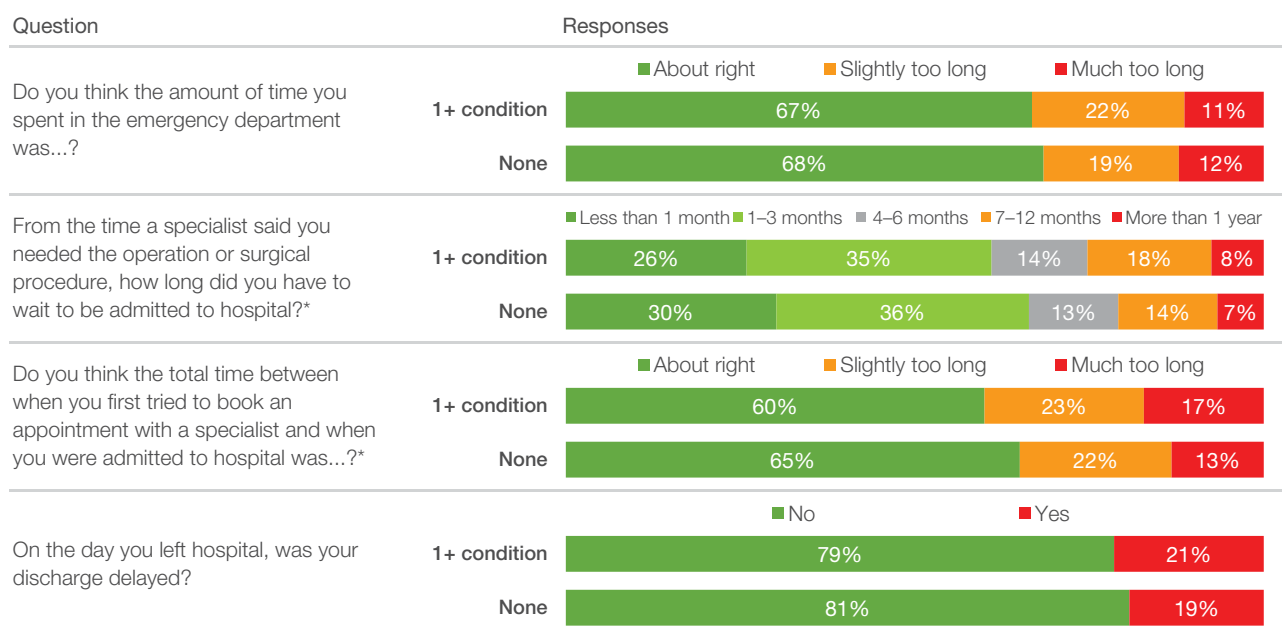
Accessibility depends upon healthcare services being available when and where patients need them. Measurement can include questions about timeliness, approachability and an absence of financial, psychological, cognitive and physical barriers to care.¹¹

Comparisons between patients with and without disability show significantly less positive responses from the disability group in the percentage who said they waited 'less than one month' to be admitted to hospital (26% and 30%); and who felt that the waiting time to be admitted to hospital was 'about right' (60 and 65%) (Figure 1.4).

Among patients with disability, responses from those admitted to a hospital in Southern NSW LHD were significantly more positive than the NSW result for two of the four questions; and significantly less positive for one (Figure 1.5).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who said the time they spent in the ED was 'about right' (a 65 percentage point range, 32% to 97%) (Figure 1.6).

Figure 1.4 Access and timeliness, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015



* There was a significant difference between the percentage of patients with and those without disability who selected the most positive response category.

Note: The difference in the waiting time to be admitted to hospital between patients with and without disability could be due to differences in the type of operation or surgical procedure being performed.

Figure 1.5 Access and timeliness, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

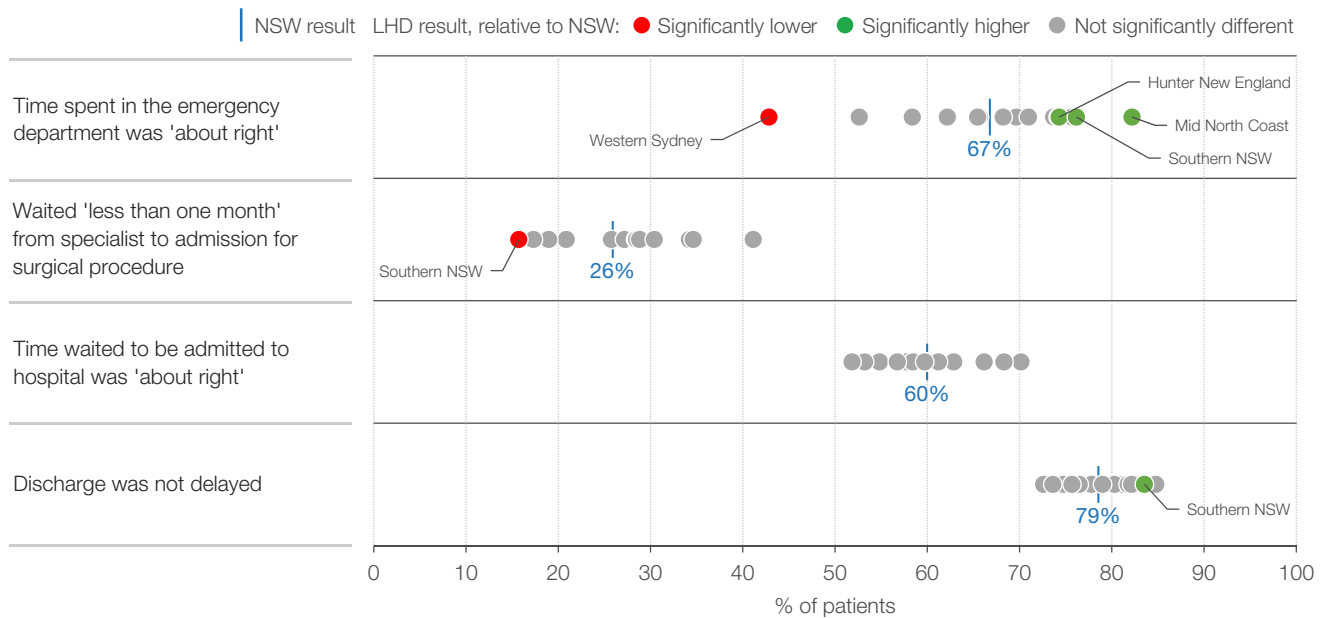
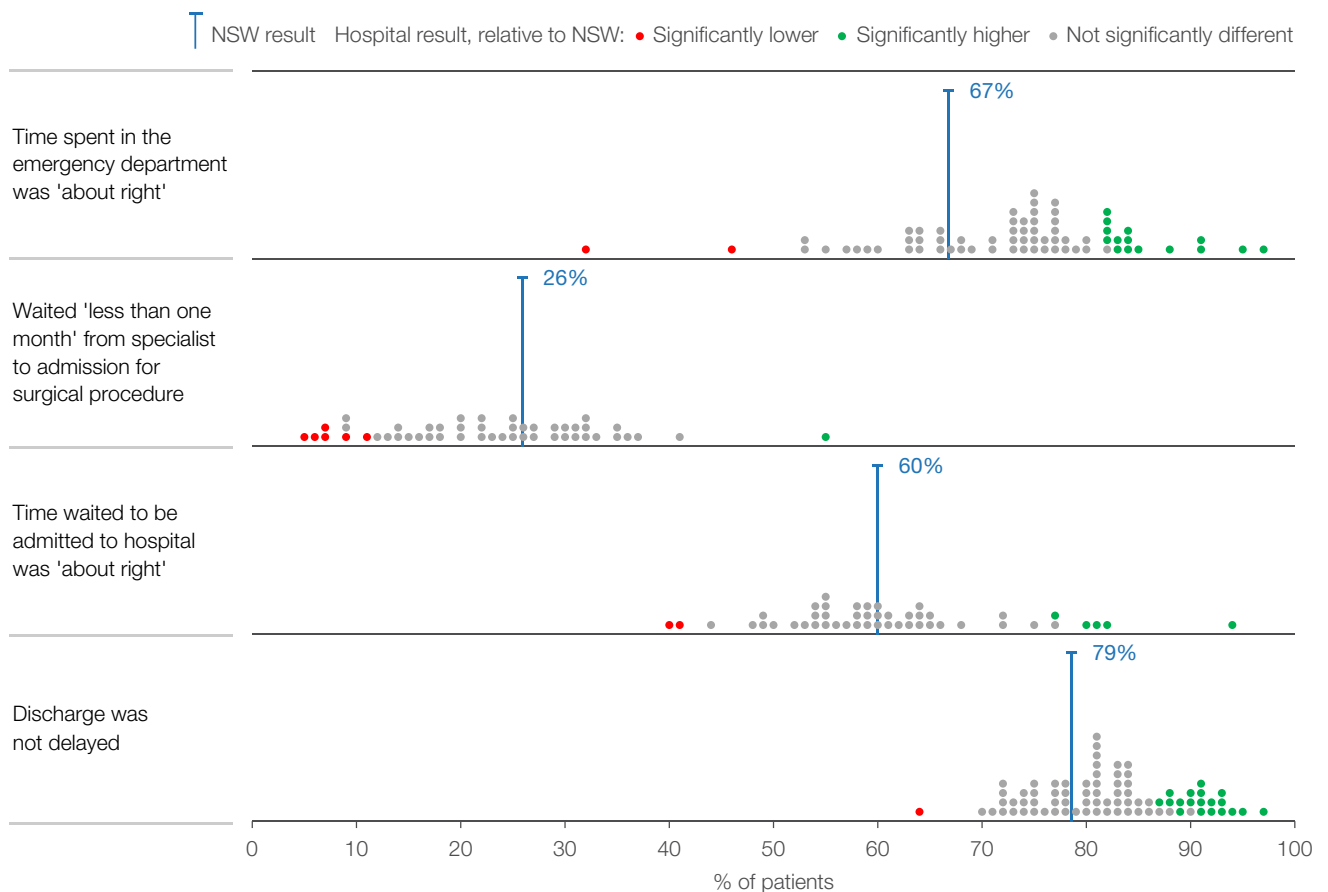


Figure 1.6 Access and timeliness, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Assistance: Responsiveness

Almost two in 10 patients with disability said health professionals did not discuss their worries or fears with them

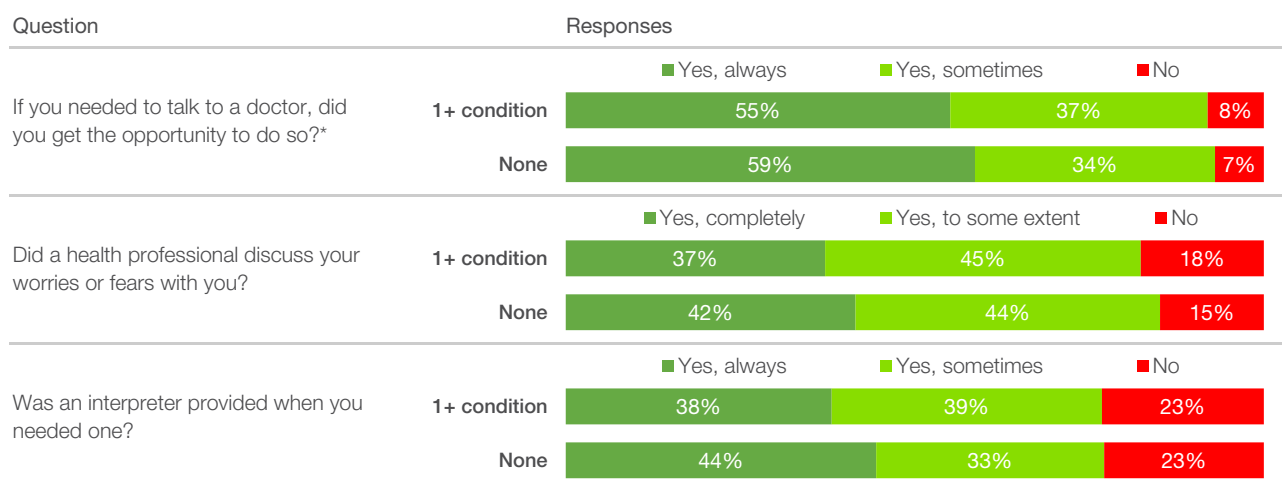
It is well recognised that responsiveness requires effective communication between patients, health staff and, where relevant, patients' carers, family, guardian and/or disability support staff. Responsive and effective communication builds an understanding of patients' health and support needs, expectations and feelings, and clarifies respective roles and responsibilities.

Comparisons between patients with and without disability show significantly less positive responses from the disability group in the percentage who said they 'always' had the opportunity to talk to a doctor when needed (55% and 59%) (Figure 1.7). There were also less positive responses from the disability group in the percentage who said they 'always' had the opportunity to talk to a nurse when needed (73% and 77%) [data not shown].

Among patients with disability, those admitted to a hospital in Hunter New England, Western NSW and Mid North Coast LHDs were significantly more positive than the NSW result in the percentage who said they 'always' had the opportunity to talk to a doctor when they needed to, while those admitted to a hospital in Western Sydney LHD were significantly less positive (Figure 1.8).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who said health professionals 'completely' discussed their worries or fears with them (a 49 percentage point range, 11% to 60%) (Figure 1.9).

Figure 1.7 Assistance: Responsiveness, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015



* There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

Figure 1.8 Assistance: Responsiveness, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

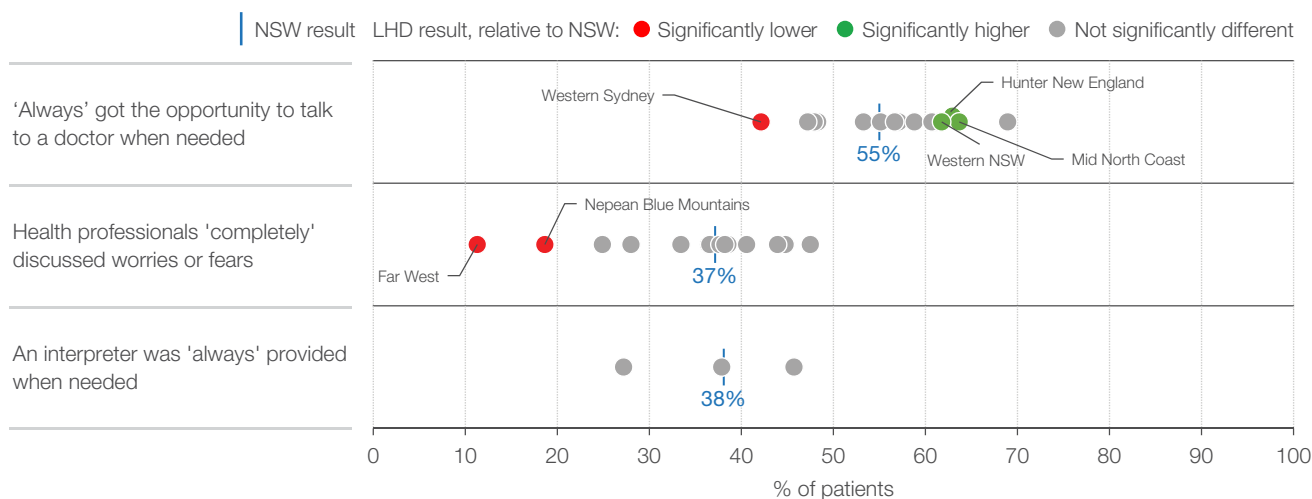
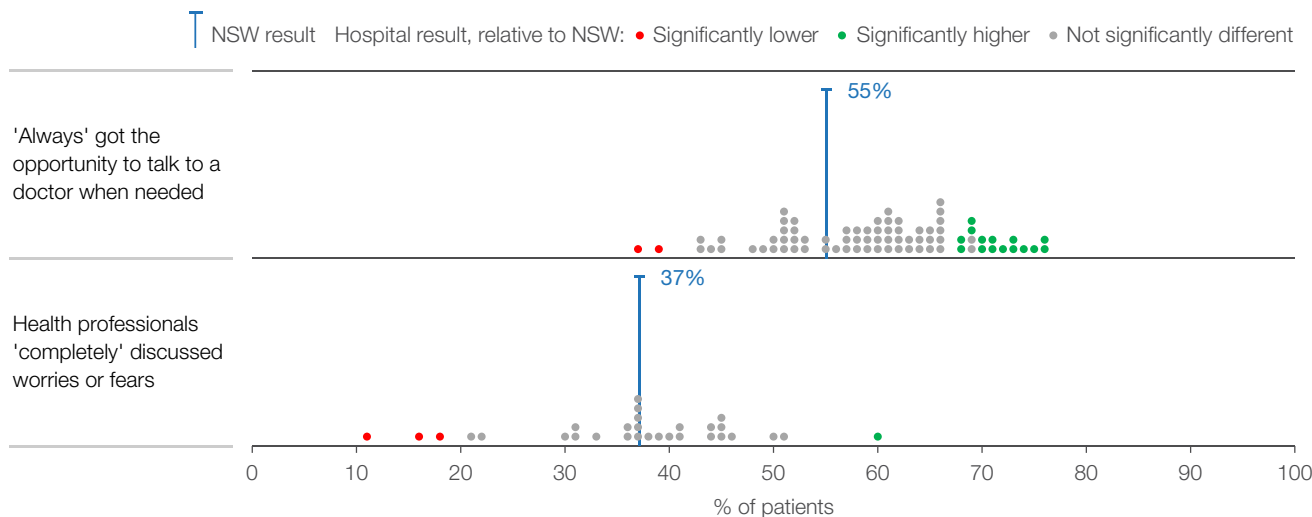


Figure 1.9 Assistance: Responsiveness, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Note: Responses regarding providing an interpreter when needed exclude patients who did not need an interpreter. None of the hospitals had the required minimum number of respondents (30) to be able to report on providing an interpreter when needed at the hospital level.

Assistance: Help when needed

Around four in 10 patients with disability said they could 'always' get assistance within a reasonable time frame

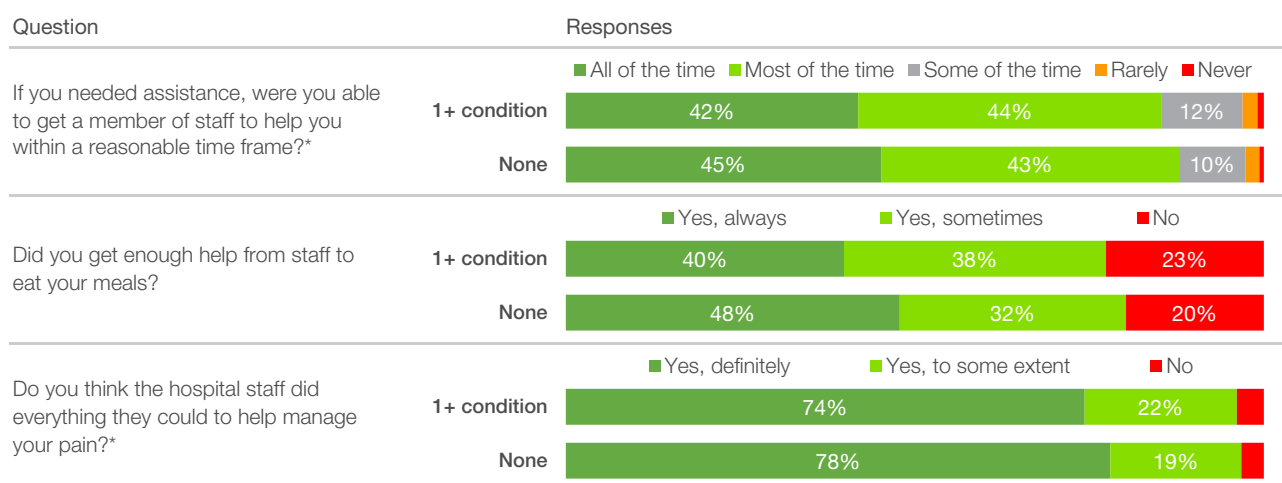
The extent to which patients' needs and expectations are recognised and responded to is central to positive patient experiences of care. For patients with disability, staff and other resources may be required to support eating, drinking, toileting and personal hygiene activities. Some patients with disability may also require frequent checks on their safety.⁸

Comparisons between patients with and without disability show significantly less positive responses from the disability group in the percentage who said staff assisted within a reasonable time frame 'all of the time' (42% and 45%); and staff 'definitely' did everything to manage their pain (74% and 78%) (Figure 1.10).

Among patients with disability, responses from those admitted to a hospital in Southern NSW LHD were significantly more positive than the NSW result regarding getting help within a reasonable time frame while those admitted to a hospital in Nepean Blue Mountains LHD were significantly less positive (Figure 1.11).

Comparing hospital-level responses from patients with disability, the widest variation was in the percentage who said they were able to get staff to assist within a reasonable time frame (a 43 percentage point range, 26% to 69%). (Figure 1.12).

Figure 1.10 Assistance: Help when needed, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015



* There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

Figure 1.11 Assistance: Help when needed, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

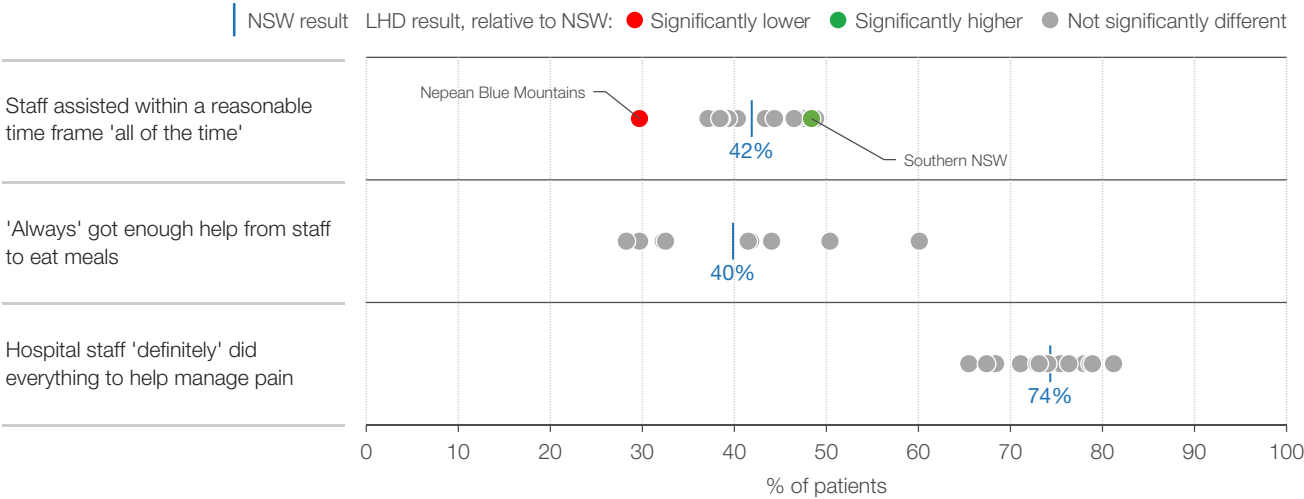
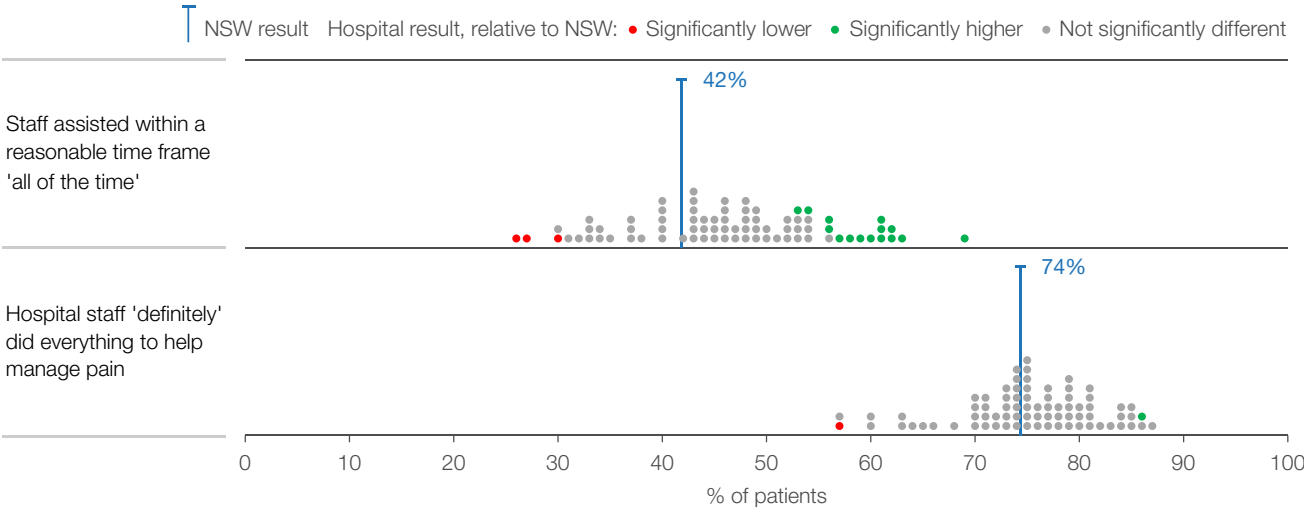


Figure 1.12 Assistance: Help when needed, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Note: Responses regarding getting help from staff to eat meals exclude patients who said they did not need help. None of the hospitals had the required minimum number of respondents (30) to be able to report on getting enough help from staff to eat their meals at the hospital level.

Comprehensive and whole-person care

Eight in 10 patients with disability said nurses were 'always' kind and caring

Whole-person care is a multilayered concept that incorporates technical proficiency, clinically appropriate services and broader considerations regarding sensitivity and responsiveness to patients' social, emotional and physical needs, and expectations.¹²

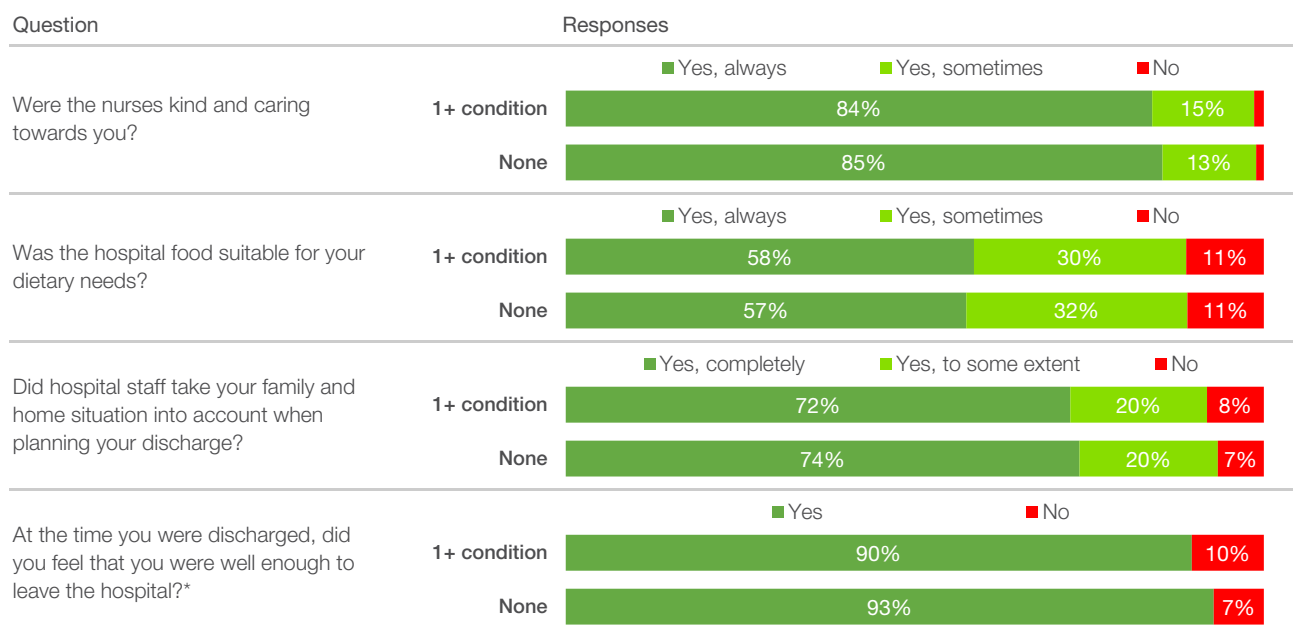
There were no significant differences between patients with and without disability in responses to questions about whether nurses were kind and caring (and whether doctors were kind and caring – data not shown); whether hospital food was suitable; and discharge planning (Figure 1.13).

However, while almost all patients said at the time of discharge they felt well enough to leave the hospital, there was a significant difference between patients with and without disability (90% and 93%) (Figure 1.13).

Among patients with disability, responses from those admitted to a hospital in Southern NSW and Mid North Coast LHDs were significantly more positive than the NSW result regarding the question of whether nurses were 'always' kind and caring (Figure 1.14).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who said staff 'completely' considered their family and home situation when planning discharge (a 32 percentage point range, 60% to 92%) (Figure 1.15).

Figure 1.13 Comprehensive and whole-person care, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015



* There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

Figure 1.14 Comprehensive and whole-person care, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

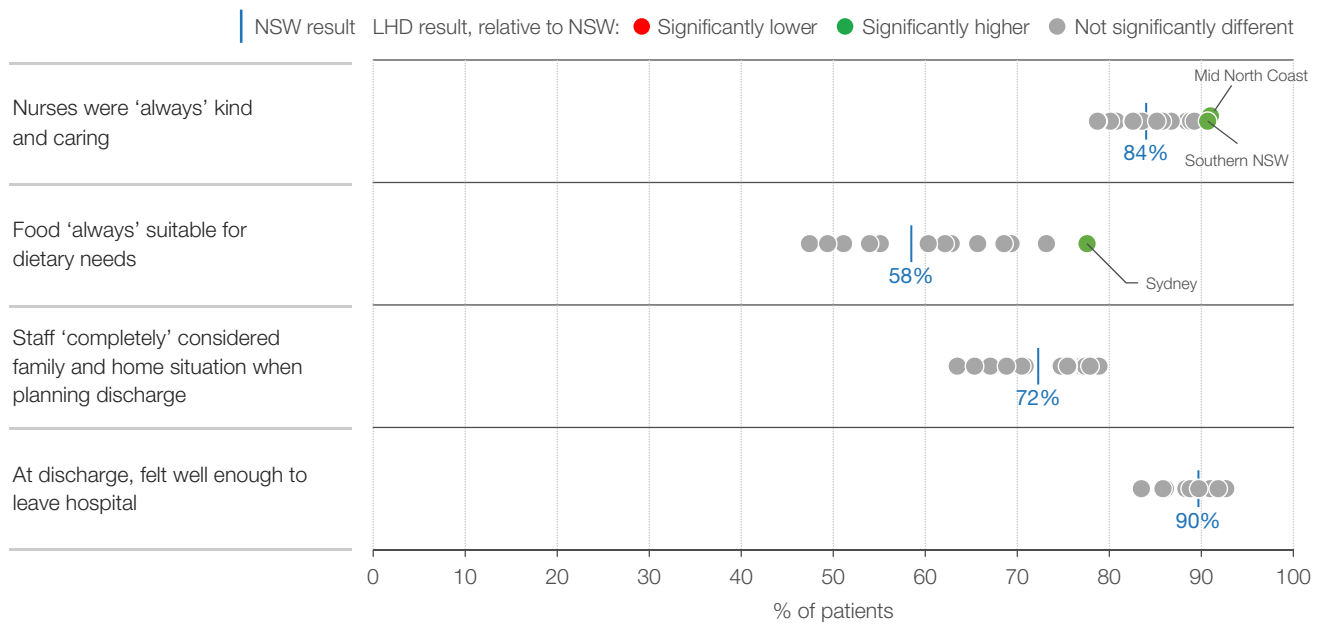
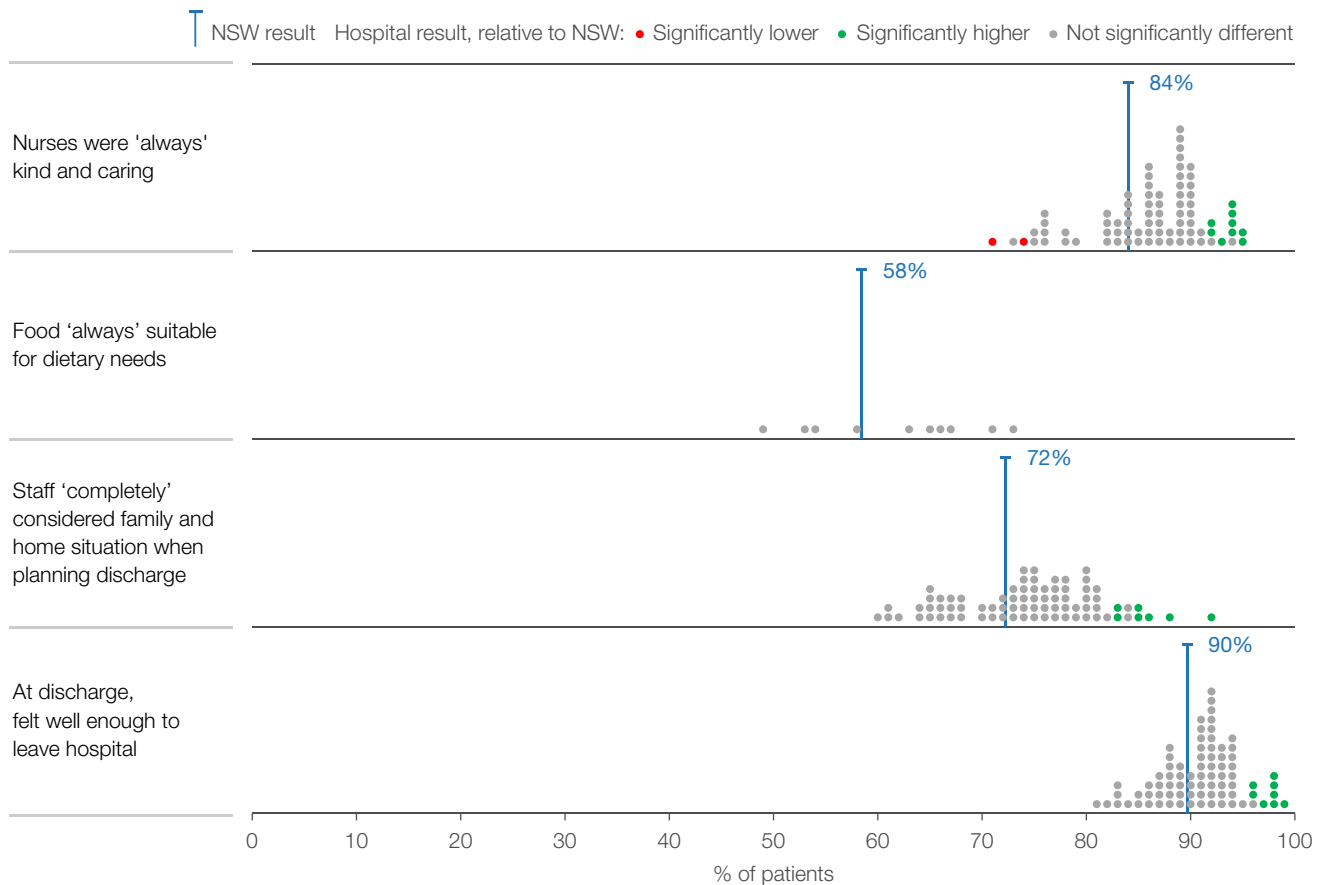


Figure 1.15 Comprehensive and whole-person care, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Coordination and continuity

Among patients with disability, 16% said they were not told who to contact if they were worried about their condition after discharge

Healthcare involves a range of different health professionals working in a variety of settings. Good coordination and continuity of care between providers and services minimises disruption and inconvenience to patients and improves information flow, care and outcomes. In NSW, LHDs and Specialty Health Networks (SHNs) should ensure that essential stages of care coordination are undertaken in each facility and are sustained as part of normal care coordination and transfer of care planning.⁶

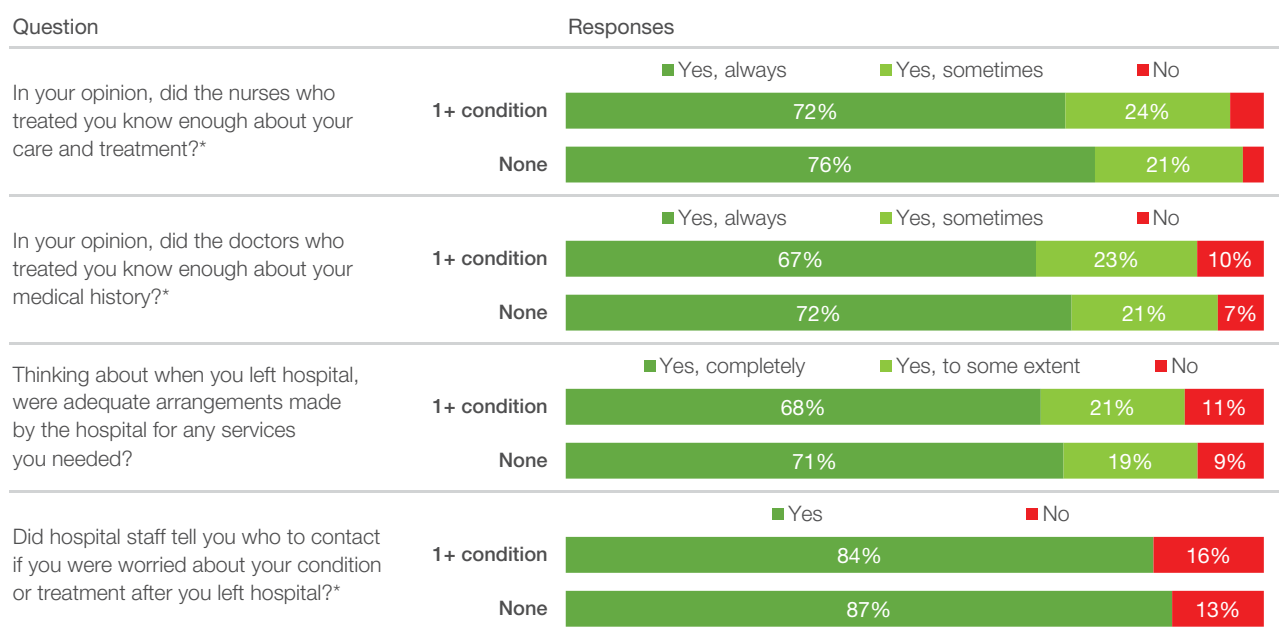
Comparisons between patients with and without disability show less significantly positive responses from the disability group in the percentage who said: nurses ‘always’ knew enough about their care and treatment (72% and 76%); doctors ‘always’ knew enough about their medical history (67% and 72%);

and staff told them who to contact if they were worried after they left the hospital (84% and 87%) (Figure 1.16).

Among patients with disability, responses from those admitted to a hospital in Western Sydney, Nepean Blue Mountains and Central Coast LHDs were significantly less positive than the NSW result for two of the four questions (Figure 1.17).

Comparing hospital-level responses from patients with disability, the widest variation was in the percentage who said ‘completely’ adequate arrangements were made at discharge for any services needed (a 39 percentage point range, 48% to 87%) (Figure 1.18).

Figure 1.16 Coordination and continuity, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015



* There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

Figure 1.17 Coordination and continuity, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

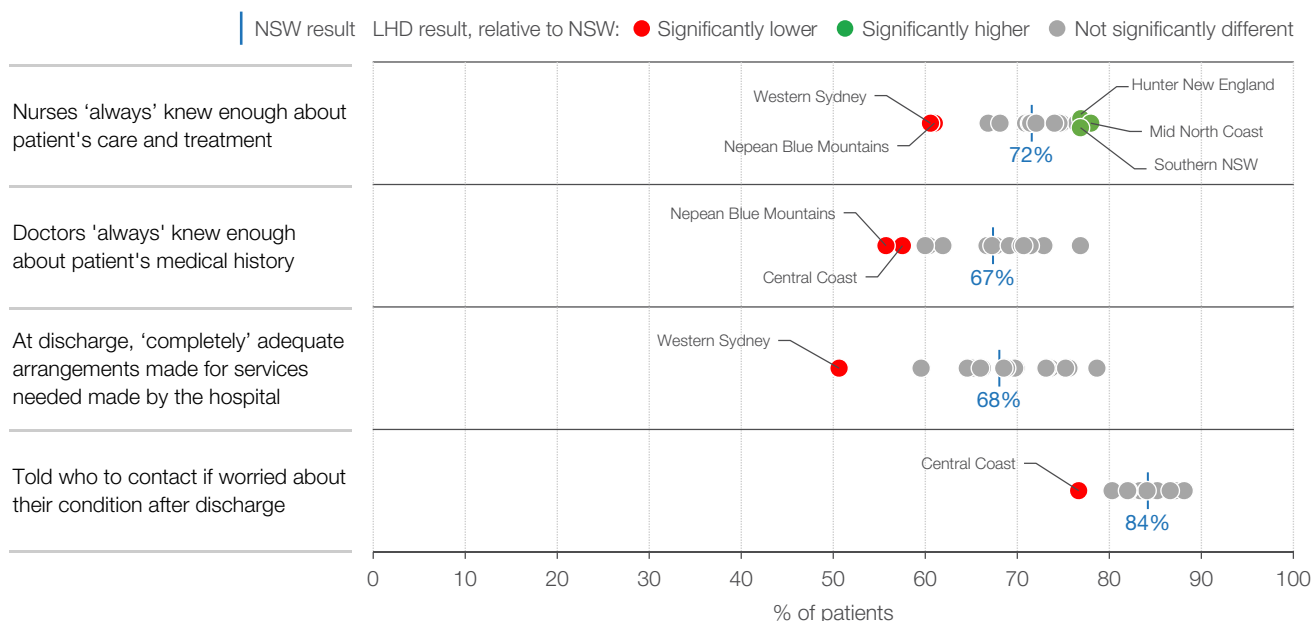
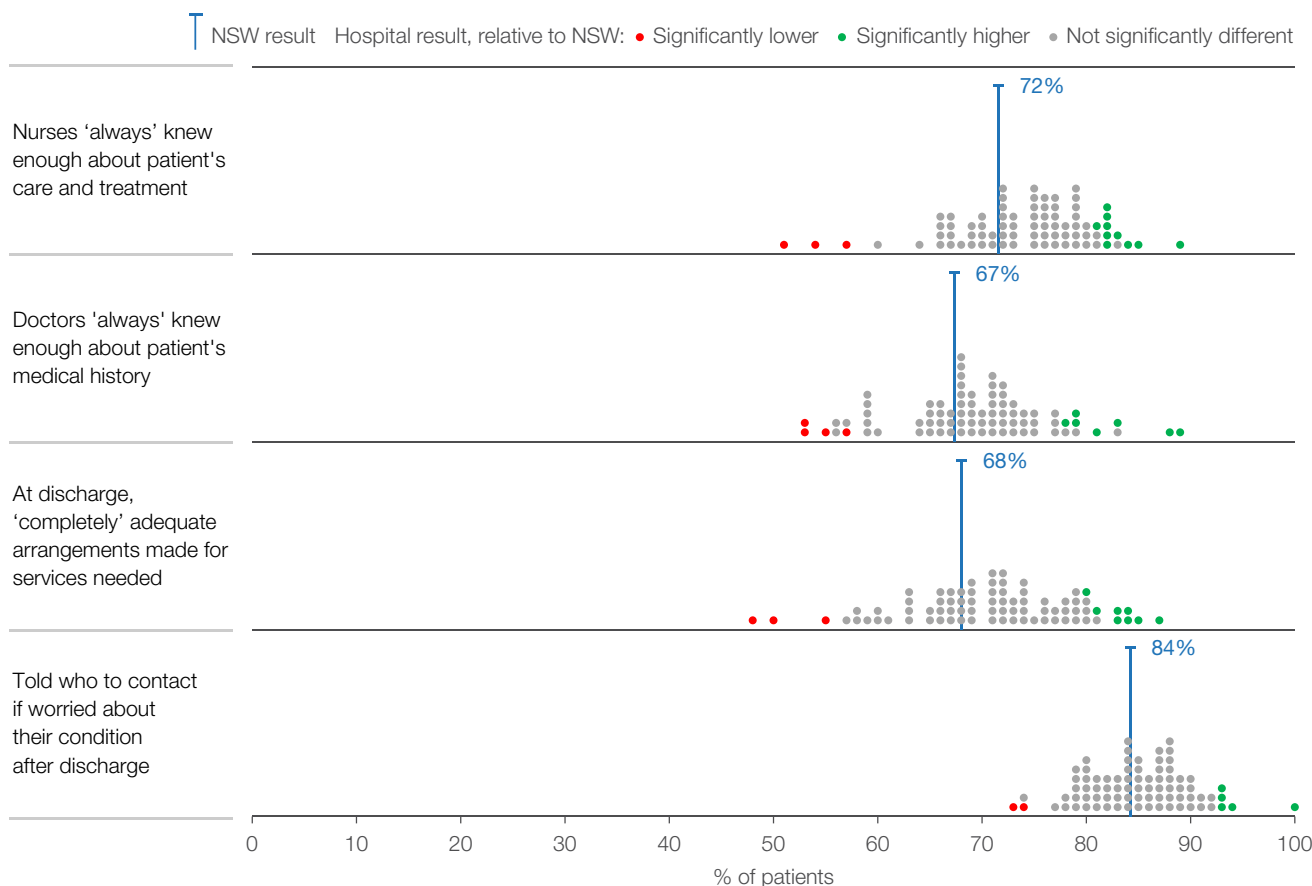


Figure 1.18 Coordination and continuity, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Engagement and participation

About six in 10 patients with disability said they were 'definitely' involved in decisions about their care

Most patients want to be involved in decisions about their care. Patient engagement involves shared decision-making processes that are informed by clear communication flow. Engaging patients in their own care makes a positive contribution to quality of care, outcomes and attitudes towards the healthcare system.¹³

NSW Health policy states the need to involve people with disability in their care, and where appropriate, consult their carer, family and disability support workers.⁶

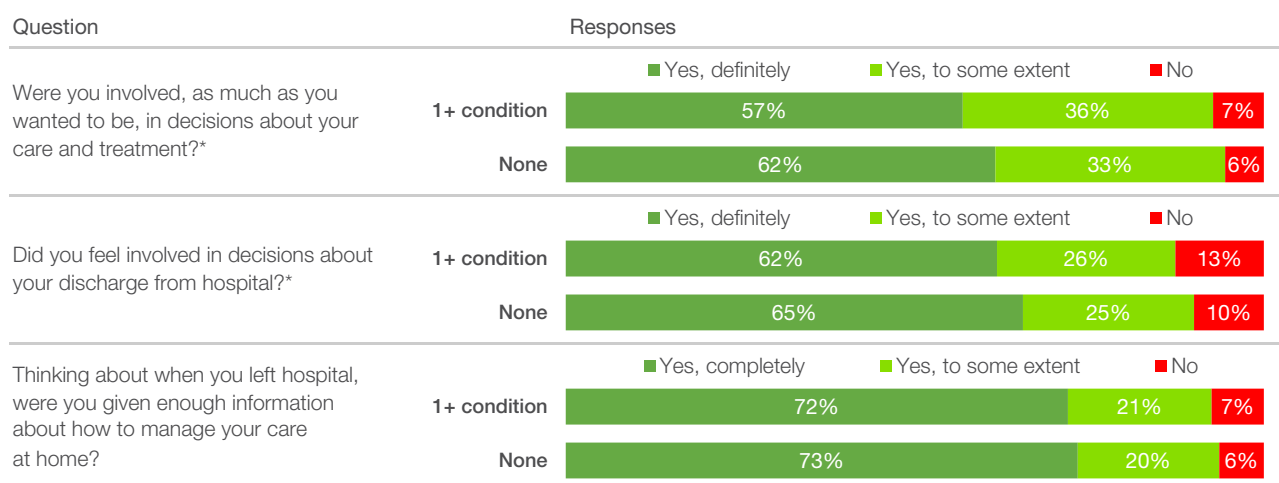
Comparisons between patients with and without disability show significantly less positive responses from the disability group in the percentage who said: they were 'definitely' involved, as much as they wanted to be, in decisions about their care and

treatment (57% and 62%); and they were 'definitely' involved in decisions about their discharge from hospital (62% and 65%) (Figure 1.19).

Among patients with disability, responses from those admitted to a hospital in Southern NSW LHD were significantly more positive than the NSW result for all three questions, and in Northern NSW LHD for two of the three questions. Responses from patients admitted to a hospital in Western Sydney and Nepean Blue Mountains LHDs were less positive than the NSW result for two of the three questions (Figure 1.20).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who said they were 'definitely' involved in decisions about their care and treatment (a 42 percentage point range, 35% to 77%) (Figure 1.21).

Figure 1.19 Engagement and participation, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015



* There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

Figure 1.20 Engagement and participation, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

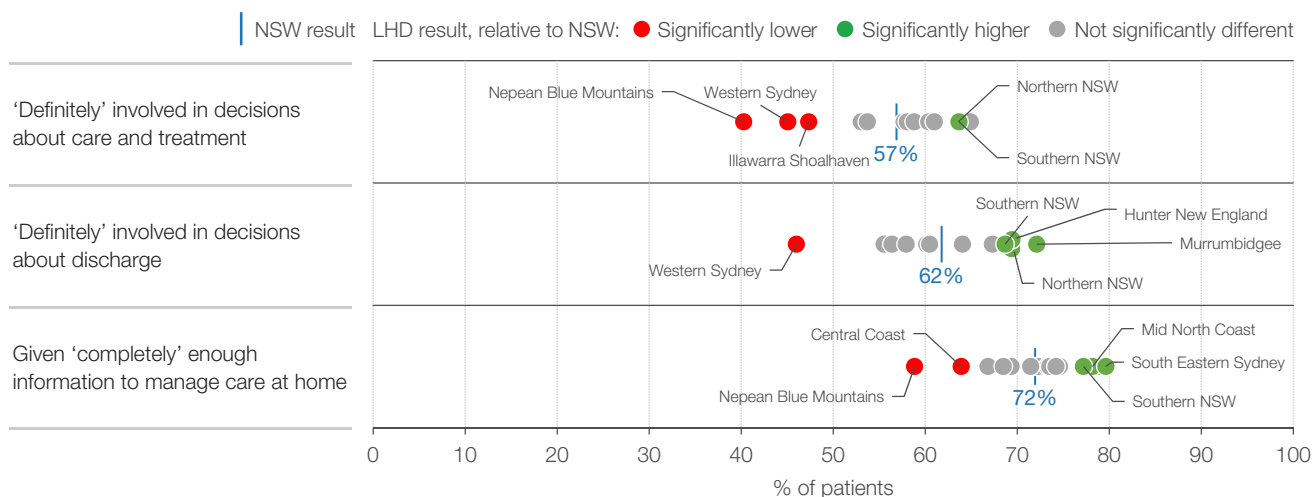
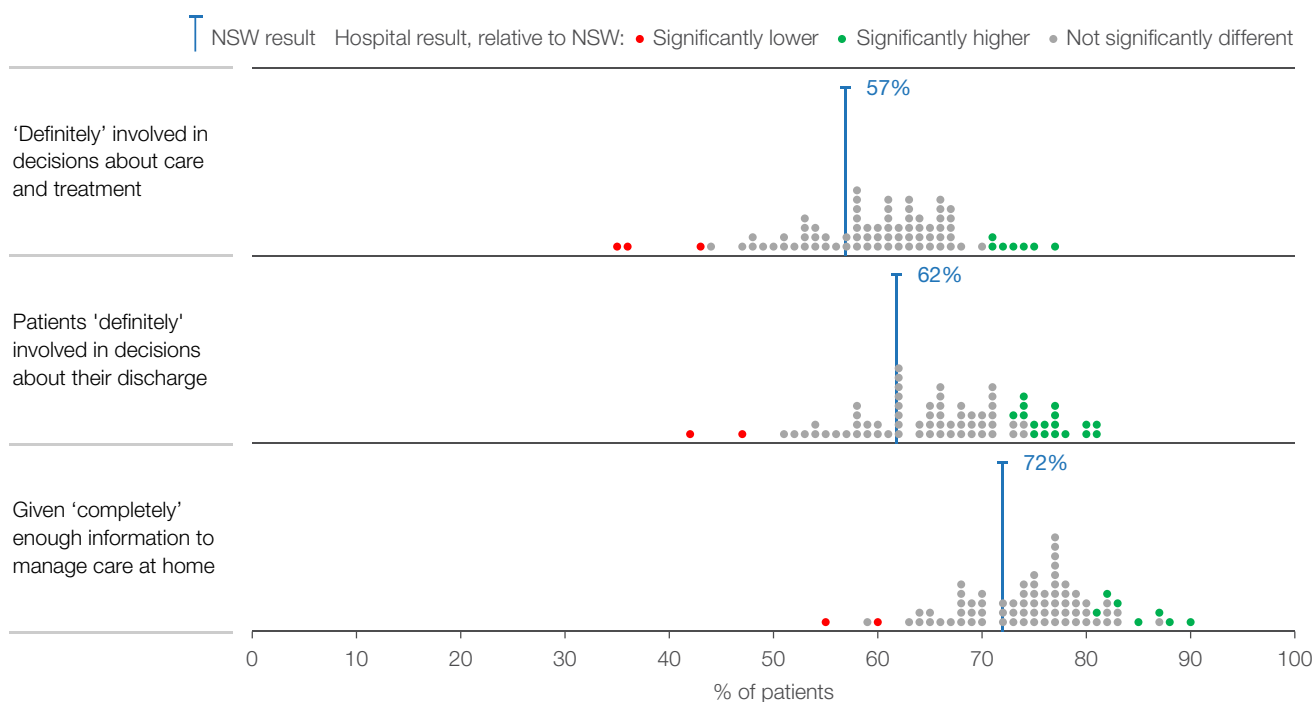


Figure 1.21 Engagement and participation, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Provision of information

Almost three in 10 patients with disability were not told about medication side effects

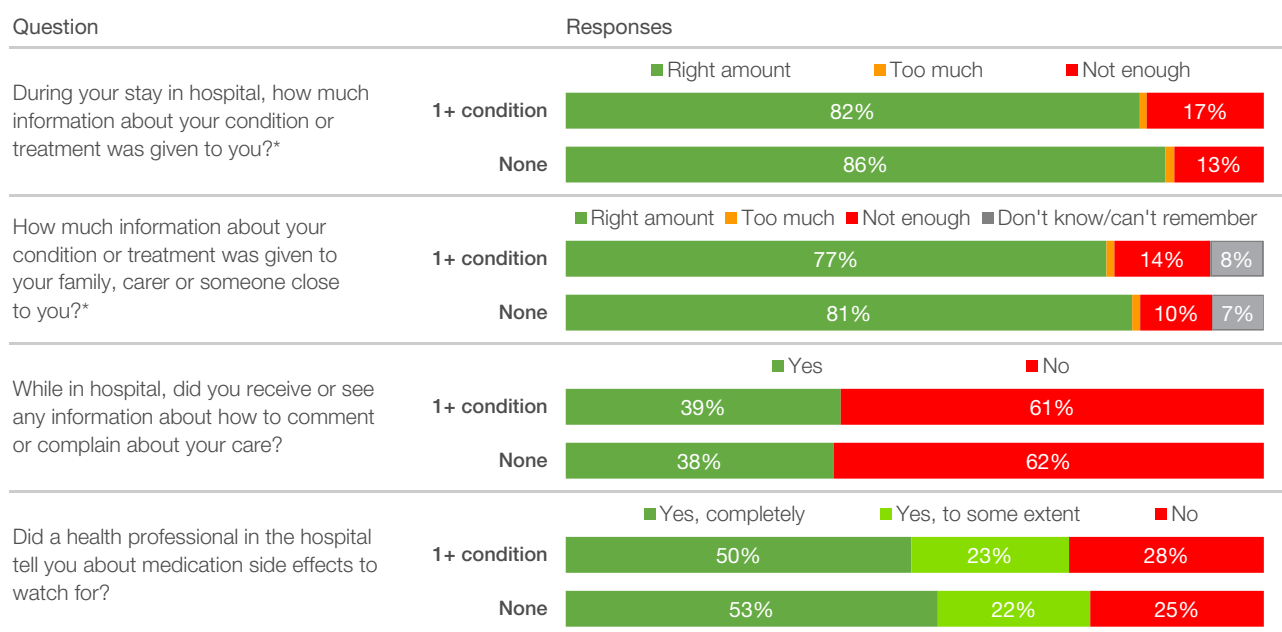
High-quality care aims to ensure that the right amount of information is provided to patients, in a format suitable for their needs.

Comparisons between patients with and without disability show significantly less positive responses from the disability group in the percentage who said: they were given the 'right amount' of information about their condition during their stay in hospital (82% and 86%); and their family was given the 'right amount' of information about their condition (77% and 81%) (Figure 1.22).

Among patients with disability, those admitted to a hospital in Hunter New England and Southern NSW LHDs were significantly more positive than the NSW result in the percentage who said they saw or received information about how to comment or complain about their care, while those admitted to a hospital in Western Sydney LHD were significantly less positive (Figure 1.23).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who said they received or saw information about how to comment or complain about their care (a 49 percentage point range, 18% to 67%) (Figure 1.24).

Figure 1.22 Provision of information, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015



* There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

Figure 1.23 Provision of information, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

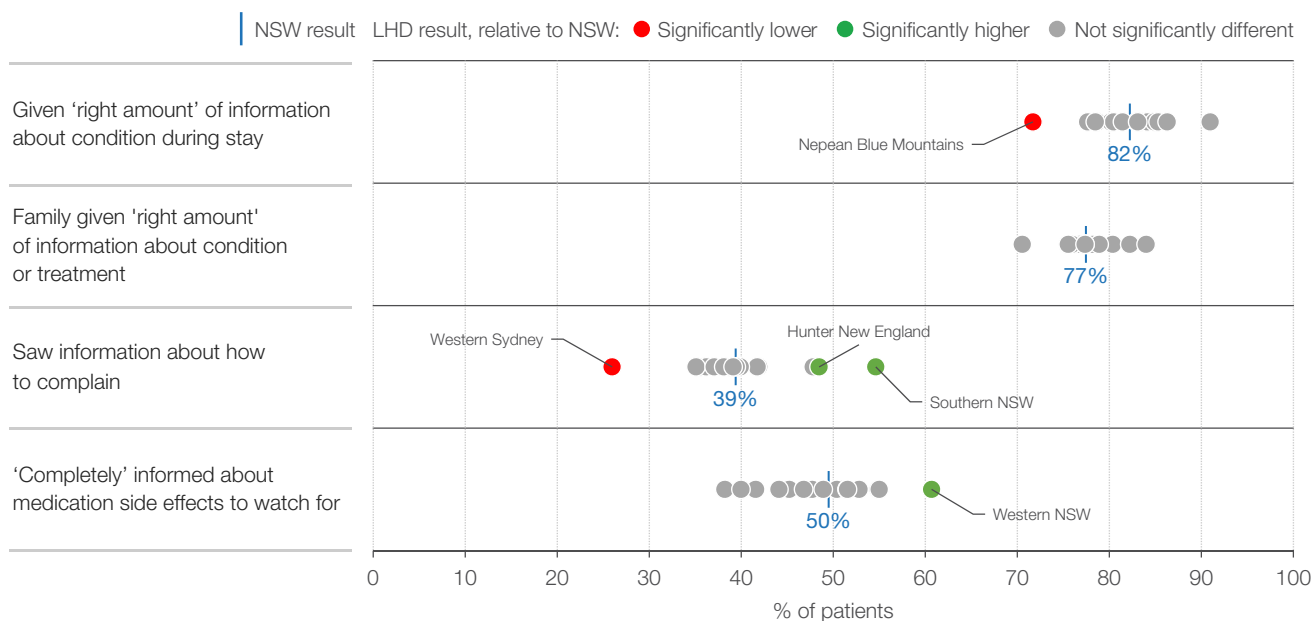
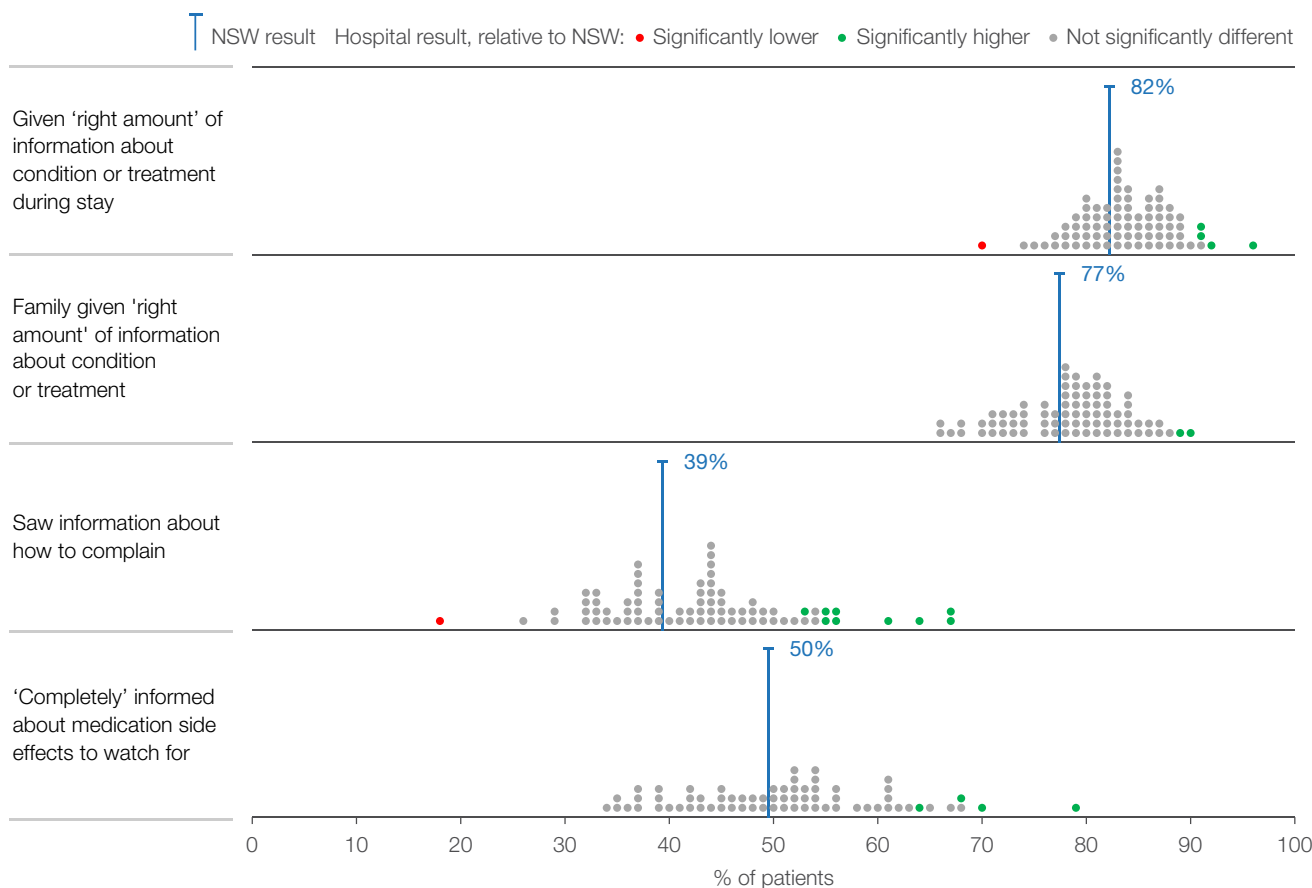


Figure 1.24 Provision of information, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Respect and dignity

Most patients with disability said they were treated respectfully, but their responses were slightly less positive than other patients

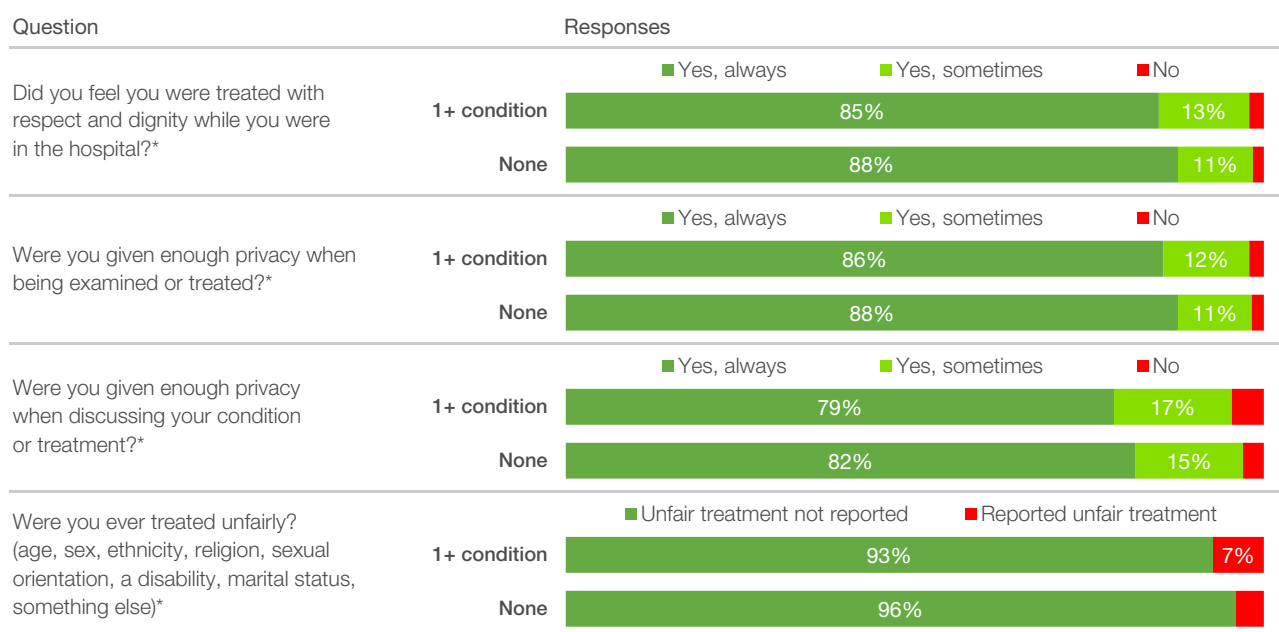
Treating patients with respect – or with due regard for their feelings, values and rights – and in ways that protect their dignity, are central elements of providing patient-centred care.

Comparisons between patients with and without disability show significantly less positive responses from the disability group in the percentage who said: they were ‘always’ treated with respect and dignity (85% and 88%); they were ‘always’ given enough privacy when being examined or treated (86% and 88%); they were ‘always’ given enough privacy when discussing their treatment or condition (79% and 82%); and that they did not experience unfair treatment (93% and 96%) (Figure 1.25).

Among patients with disability, responses from those admitted to a hospital in Mid North Coast LHD were significantly more positive than the NSW result for two questions (Figure 1.26).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who said they were ‘always’ given enough privacy when discussing their condition or treatment (a 26 percentage point range, 66% to 92%) (Figure 1.27).

Figure 1.25 **Respect and dignity, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015**



* There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

Figure 1.26 Respect and dignity, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

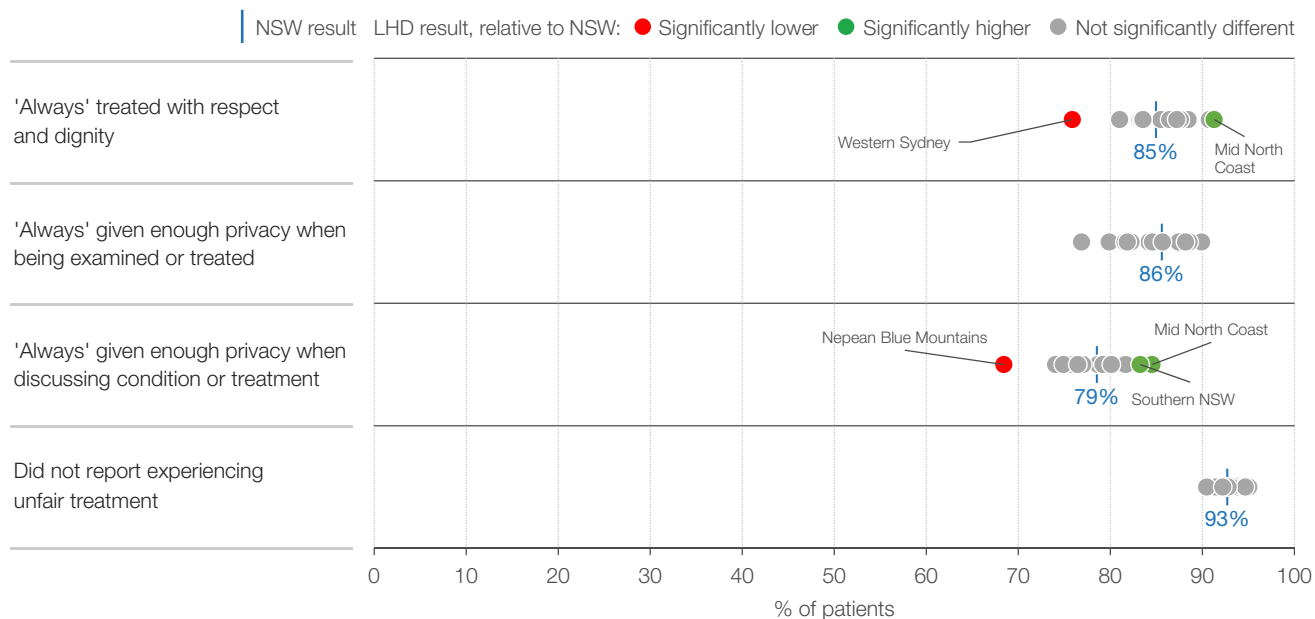
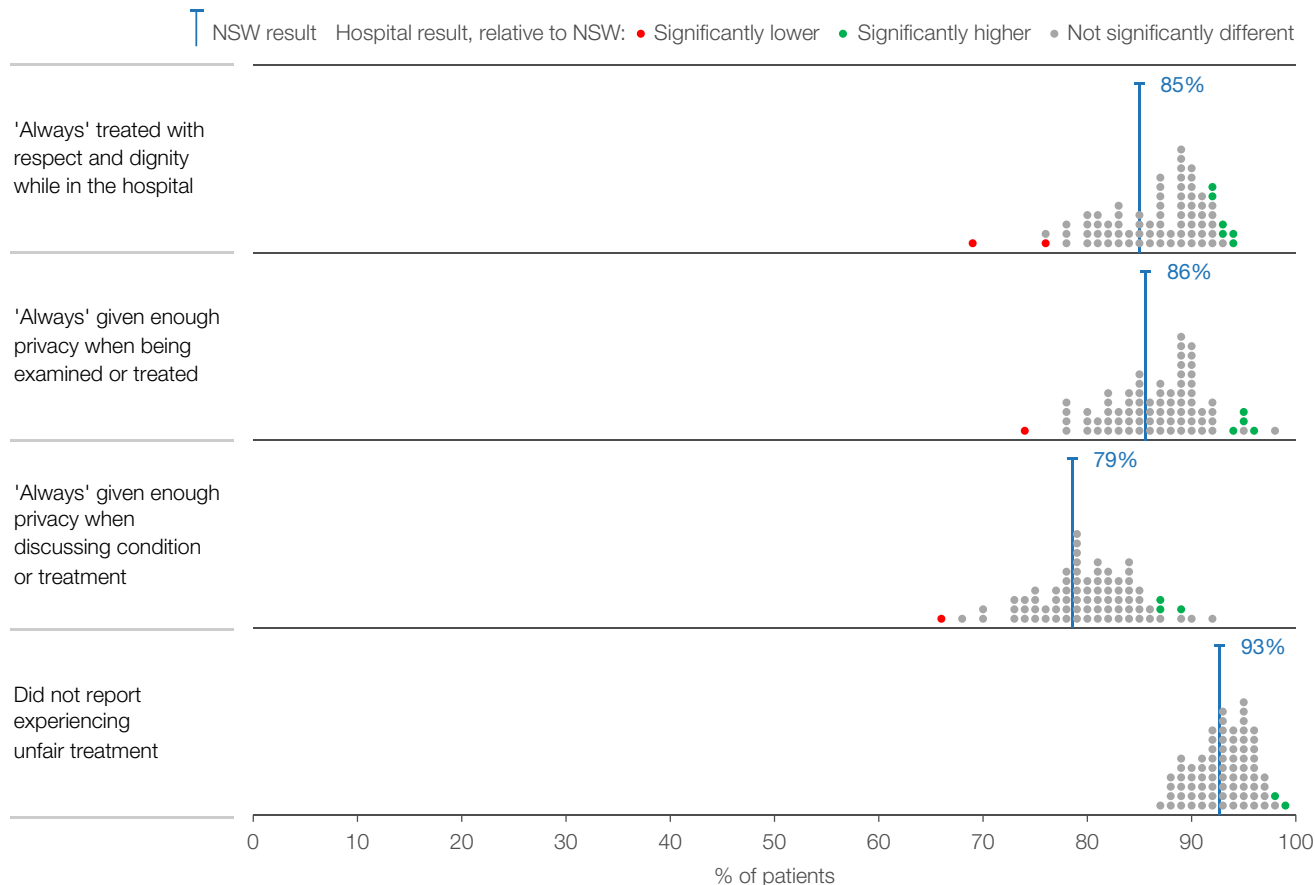


Figure 1.27 Respect and dignity, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Politeness and courtesy

Regardless of disability, nine in 10 patients said hospital staff were 'always' polite and courteous

Respect is enacted through appropriate conduct, attitudes, words and practises of health service staff. The courtesy of professionals has been shown to be an important factor in patients' reported care experiences. Together with participative provider care, studies have shown that staff courtesy is a strong predictor of satisfaction.¹⁴

Comparisons between patients with and without disability showed no significant differences in the percentage who said hospital staff were polite and courteous (Figure 1.28).

Among patients with disability, those admitted to a hospital in Mid North Coast LHD were significantly more positive than the NSW result in the percentage who said emergency department (ED) staff were 'always' polite and courteous, while those admitted to a hospital in South Western Sydney LHD were significantly less positive (Figure 1.29).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who said ED staff were 'always' polite and courteous (a 27 percentage point range, 73% to 100%) (Figure 1.30).

Figure 1.28 Politeness and courtesy, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015

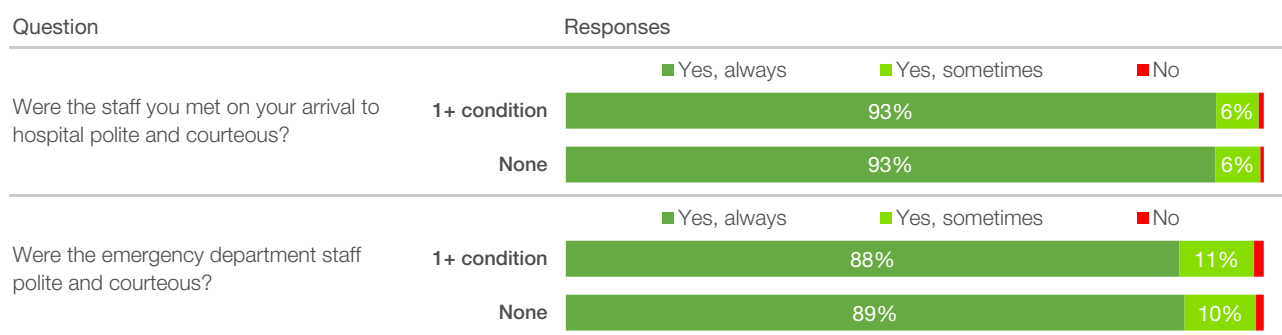


Figure 1.29 Politeness and courtesy, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

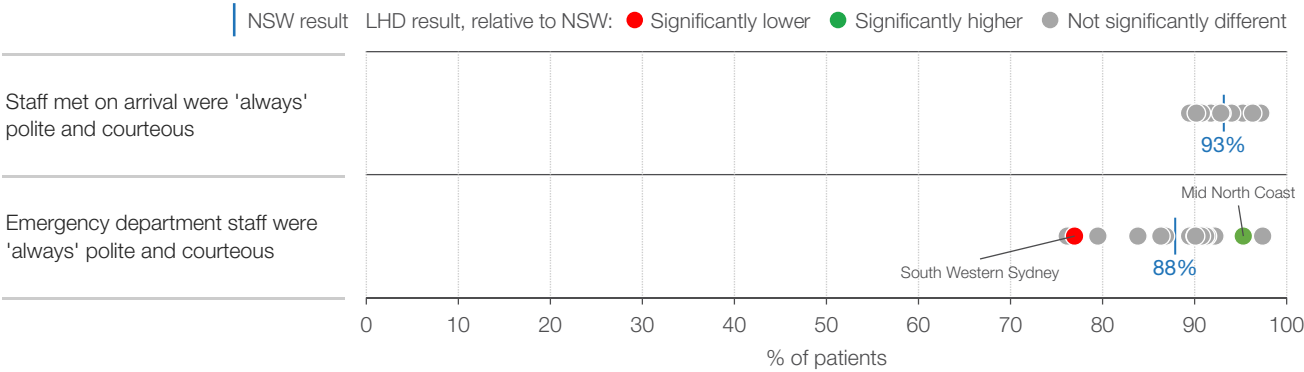
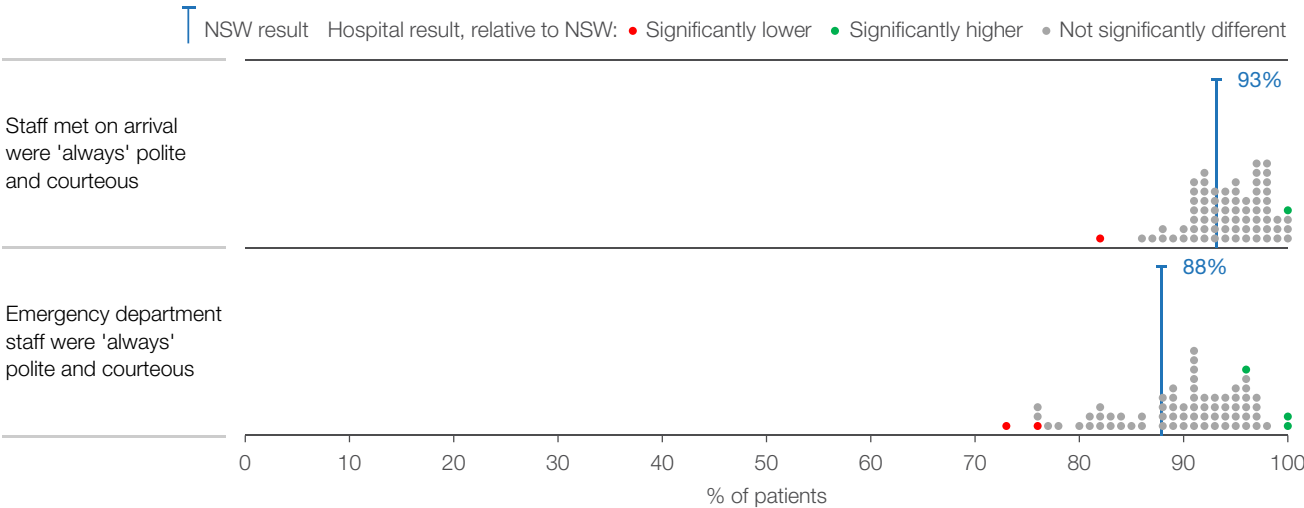


Figure 1.30 Politeness and courtesy, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Understandable communication

Patients with disability responded less positively to questions regarding understandable communication

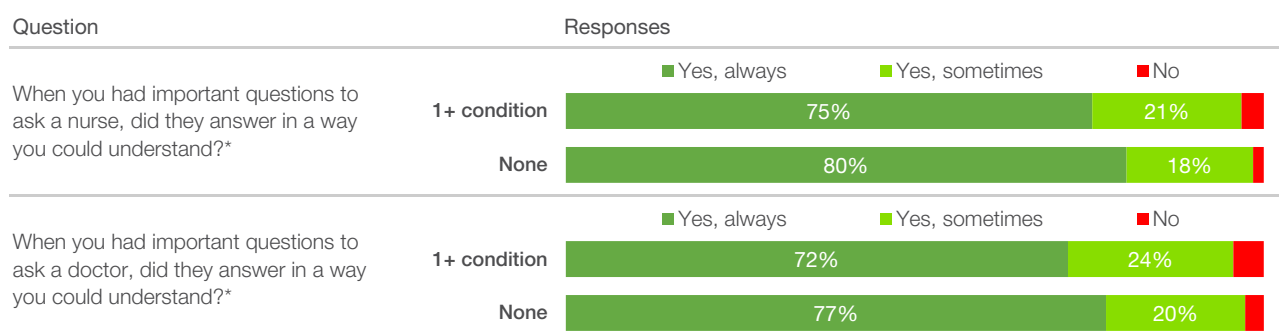
Proper engagement with, and respect for, patients can only be achieved if information is given in an understandable and accessible way. A significant factor associated with patient experience is the existence and degree of effective communication between health staff and the patient.

Comparisons between patients with and without disability show significantly less positive responses from the disability group in the percentage who said: nurses 'always' answered questions in an understandable way (75% and 80%); and doctors 'always' answered questions in an understandable way (72% and 77%) (Figure 1.31).

Among patients with disability, responses from those admitted to a hospital in Southern NSW LHD were significantly more positive than the NSW result for both questions (Figure 1.32).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who said doctors 'always' answered questions in an understandable way (a 36 percentage point range, 51% to 87%) (Figure 1.33).

Figure 1.31 Understandable communication, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015



* There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

Figure 1.32 Understandable communication, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

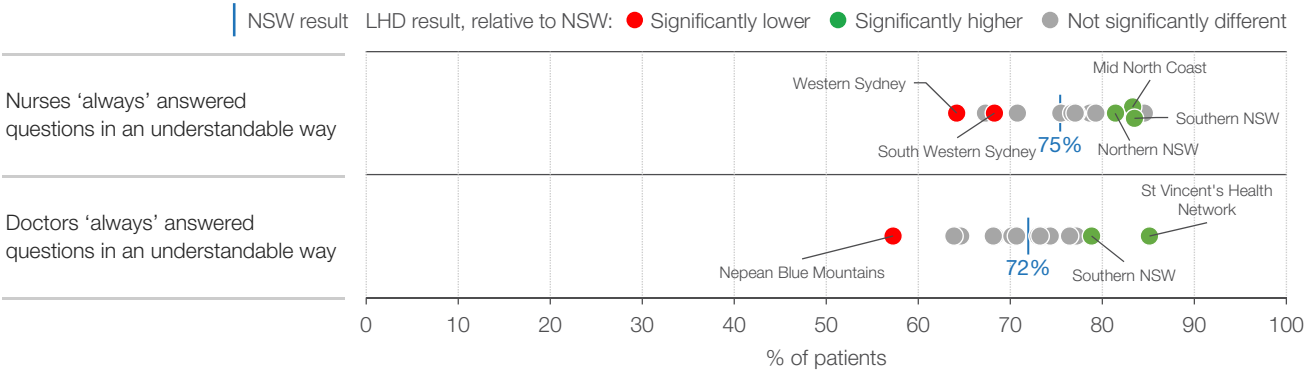
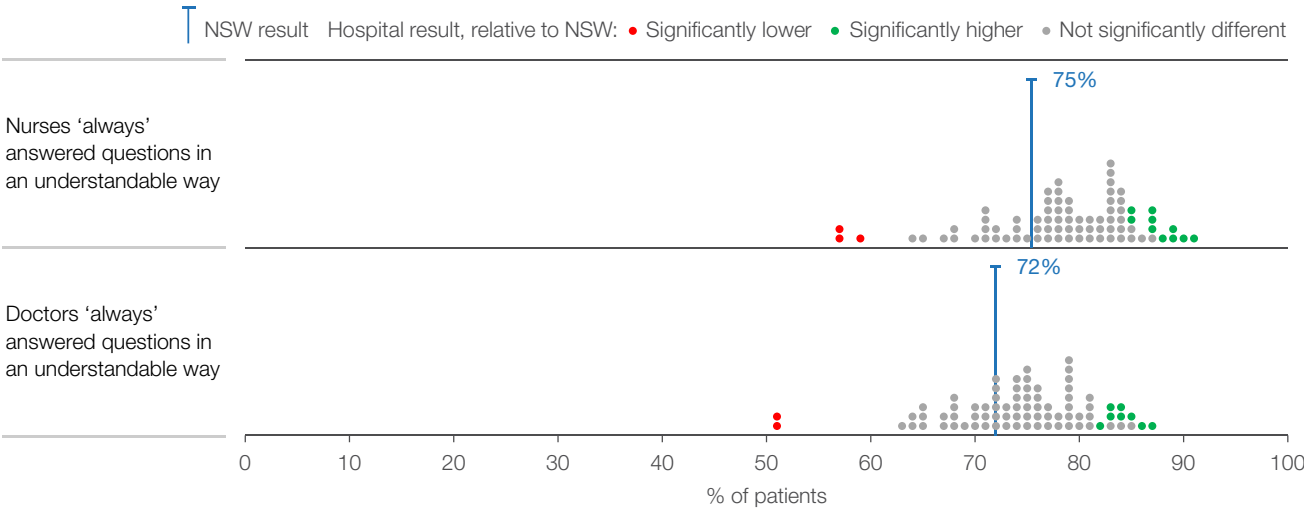


Figure 1.33 Understandable communication, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Confidence and trust

Most patients said they 'always' had confidence and trust in nurses

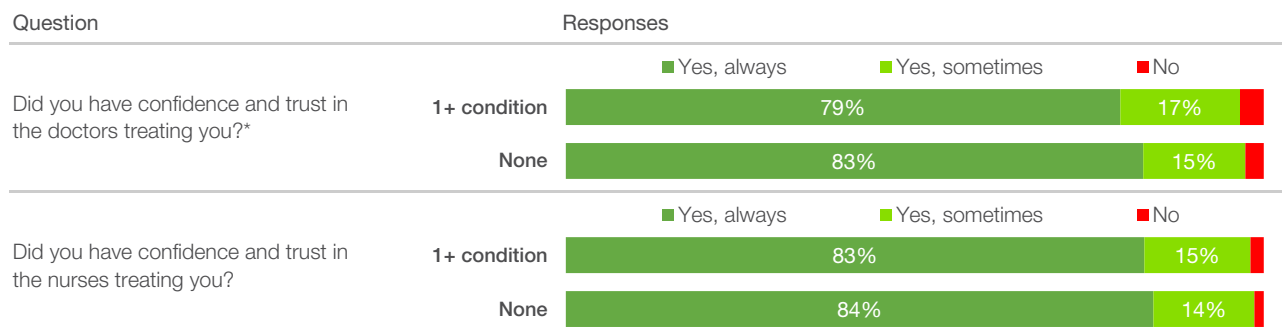
Trust is fundamentally important in healthcare relationships and is associated with greater use of preventive health services and adherence to treatment.¹⁵

Comparisons between patients with and without disability show significantly less positive responses from the disability group in the percentage who said they 'always' had confidence and trust in the doctors treating them (79% and 83%) (Figure 1.34).

Among patients with disability, those admitted to a hospital in Hunter New England and Mid North Coast LHDs were significantly more positive than the NSW result in the percentage who said they 'always' had confidence and trust in the nurses treating them, while those admitted to a hospital in Western Sydney LHD were significantly less positive (Figure 1.35).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who said they 'always' had confidence and trust in the doctors treating them (a 33 percentage point range, 63% to 96%) (Figure 1.36).

Figure 1.34 Confidence and trust, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015



* There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

Figure 1.35 Confidence and trust, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

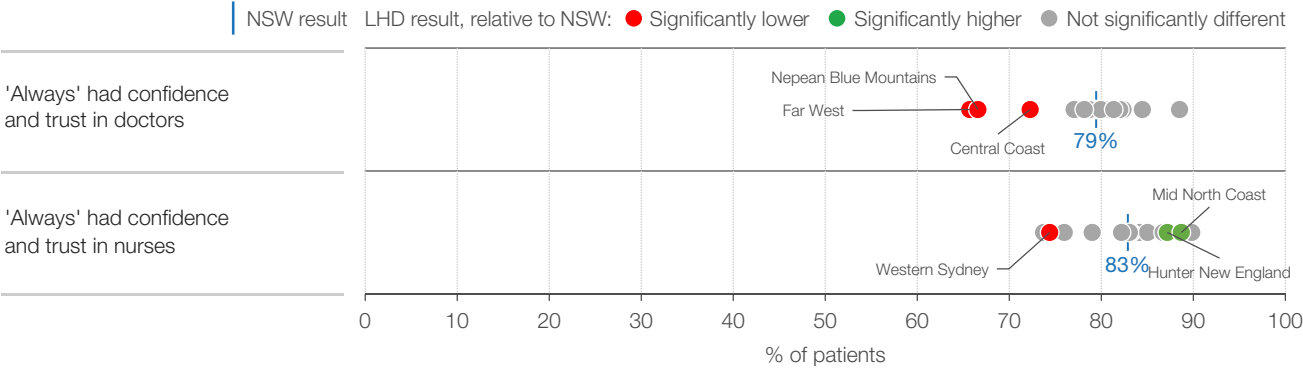
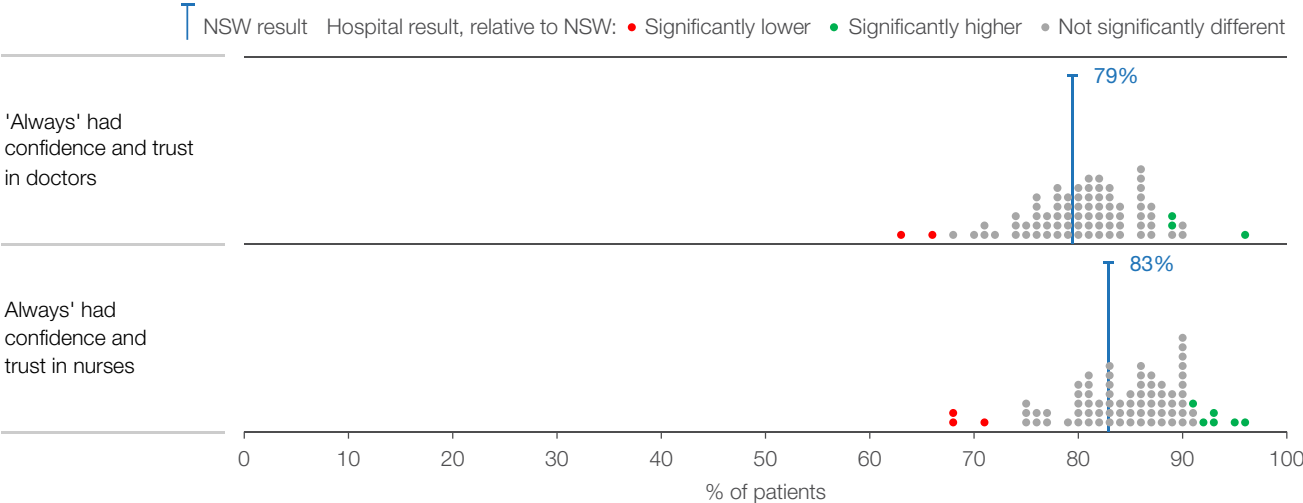


Figure 1.36 Confidence and trust, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Safety and hygiene: Physical amenities

Regardless of disability, almost seven in 10 patients said wards were 'very clean'

Patient surveys ask patients a range of different questions – seeking objective descriptions of the healthcare services provided to them, as well as more subjective views about their experiences and outcomes of care. Cleanliness is an objective measure that is likely to be rated consistently by patients regardless of disability.

Comparisons between patients with and without disability show no significant differences in the percentage who said hospital wards or bathrooms were clean (Figure 1.37).

Importantly, the absence of differences between groups on questions about cleanliness at the NSW level suggests there is no systematic bias in the results presented in this report. That is, where differences are detected in other more subjective

measures, we can be confident they are reflecting real differences in experiences rather than a tendency to always respond negatively or positively.

Among patients with disability, responses from those admitted to a hospital in Southern NSW, Mid North Coast, Northern NSW and Western NSW LHDs were significantly more positive than the NSW result for both questions; and those from Western Sydney and Nepean Blue Mountains LHDs were significantly less positive for both questions (Figure 1.38).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who said toilets and bathrooms were 'very clean' (a 54 percentage point range, 38% to 92%) (Figure 1.39).

Figure 1.37 Safety and hygiene: Physical amenities, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015

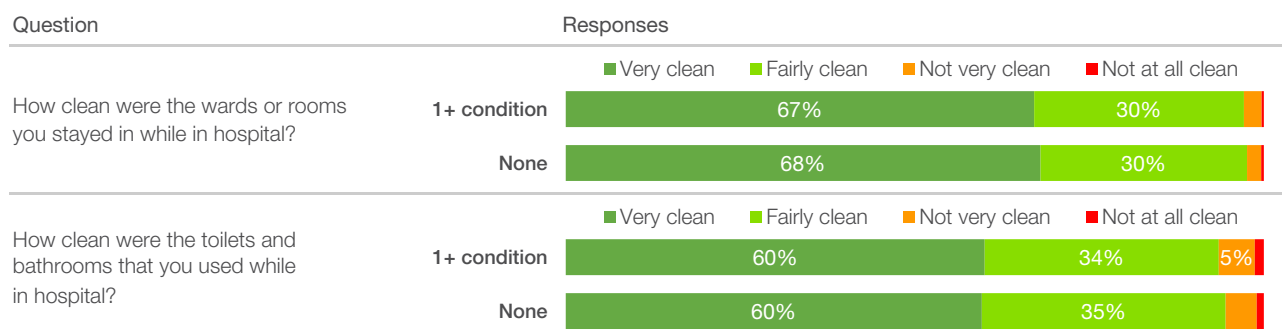


Figure 1.38 Safety and hygiene: Physical amenities, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

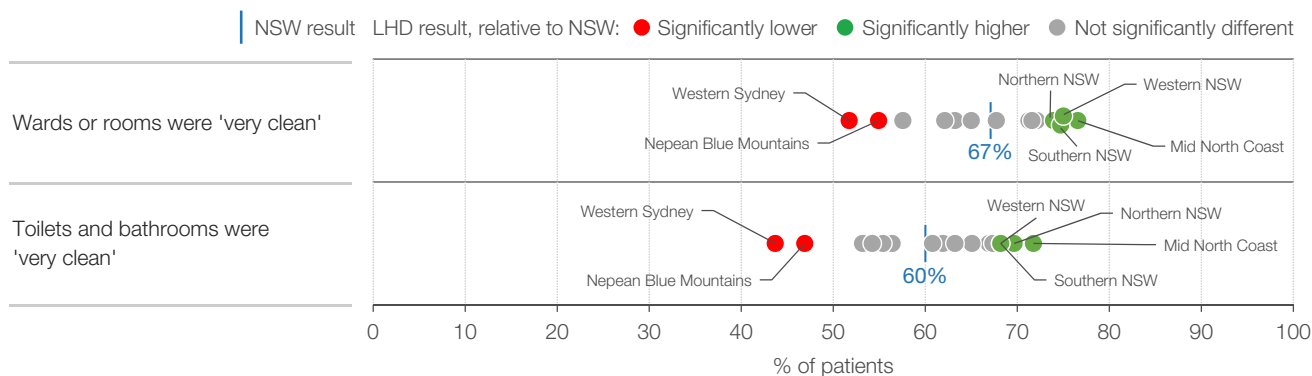
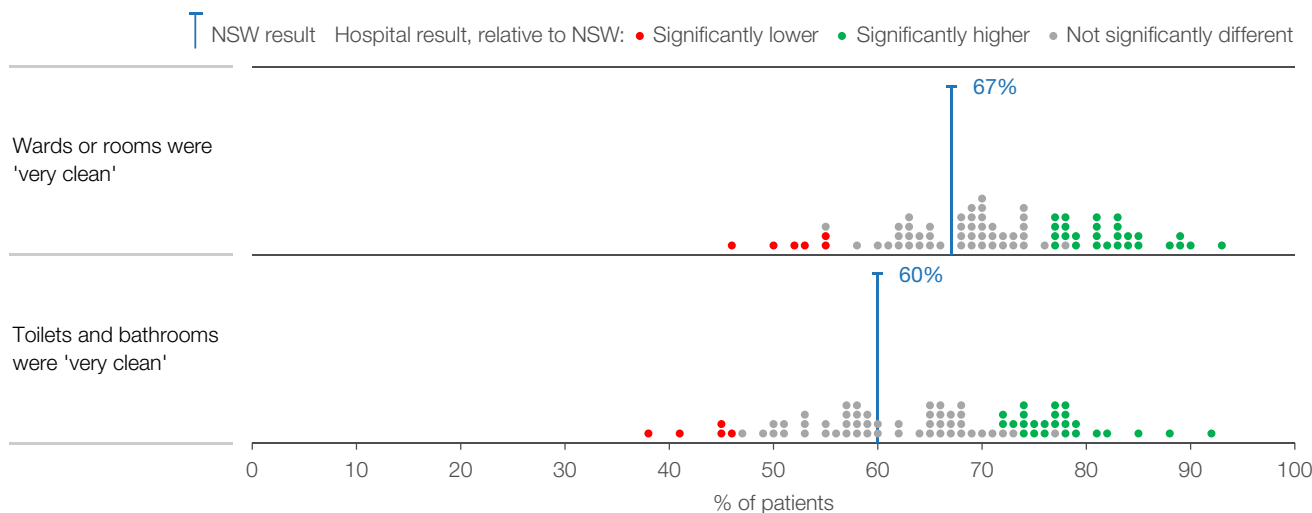


Figure 1.39 Safety and hygiene: Physical amenities, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Safety and hygiene: Processes of care

Patients with and without disability gave similar responses to safety and hygiene questions

All patients, of course, should have access to safe hospital care delivered in a clean, comfortable environment.

Comparisons between patients with and without disability show no significant differences in the percentage who observed appropriate safety and hygiene practices (Figure 1.40).

Among patients with disability, those admitted to a hospital in Mid North Coast LHD were significantly more positive than the NSW result in the percentage who said nurses 'always' checked their identification band before giving medications, treatments or tests; while those admitted to a hospital in Far West LHD were significantly less positive (Figure 1.41).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who said they 'always' saw nurses wash their hands, use hand gel, or put on clean gloves before they were touched by them (a 40 percentage point range, 42% to 82%) (Figure 1.42).

Figure 1.40 Safety and hygiene: Processes of care, percentage of patients who selected each response category, by patients with and without disability, NSW public hospitals, 2015

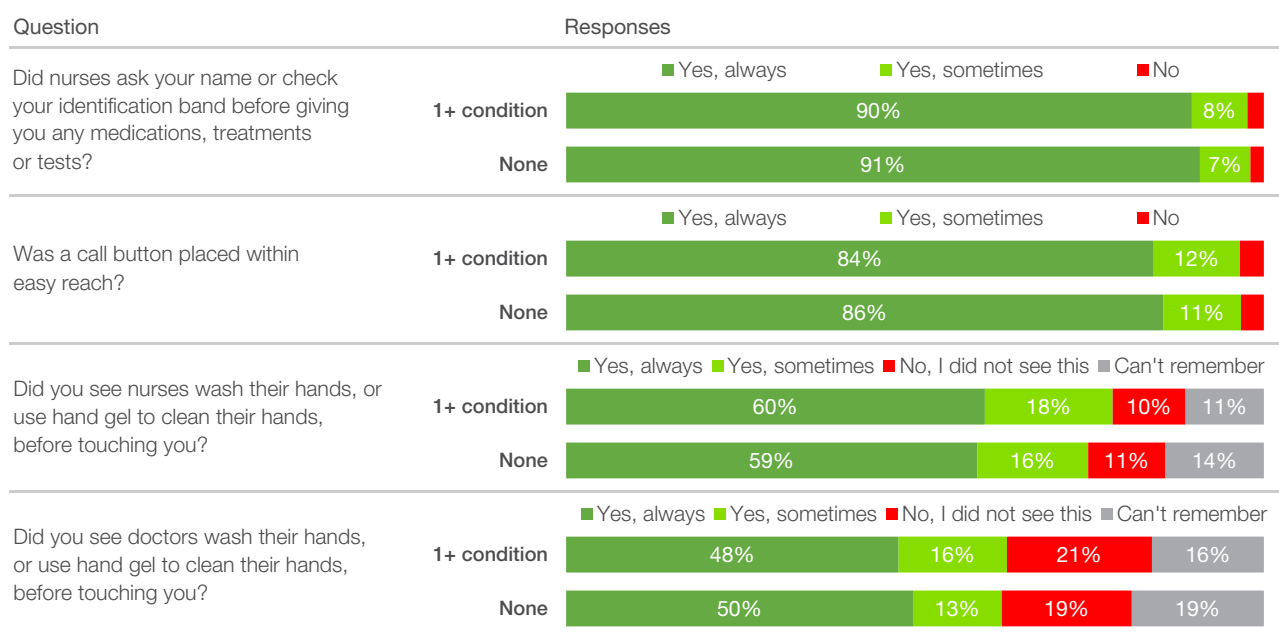


Figure 1.41 Safety and hygiene: Processes of care, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015

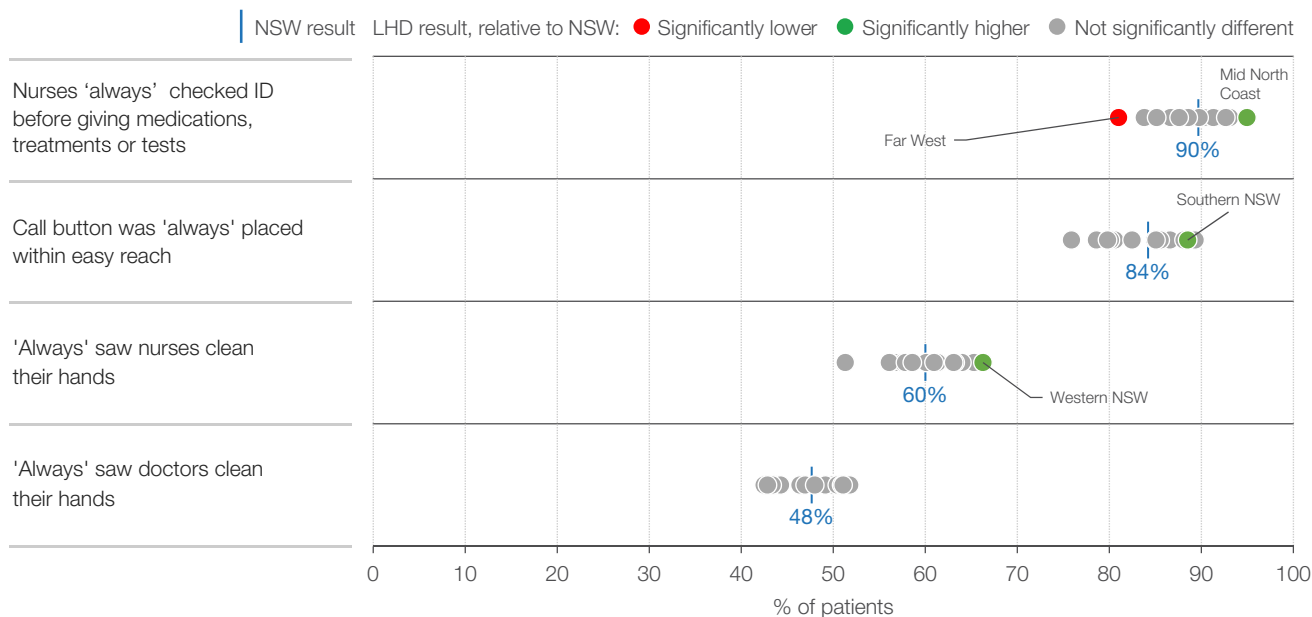
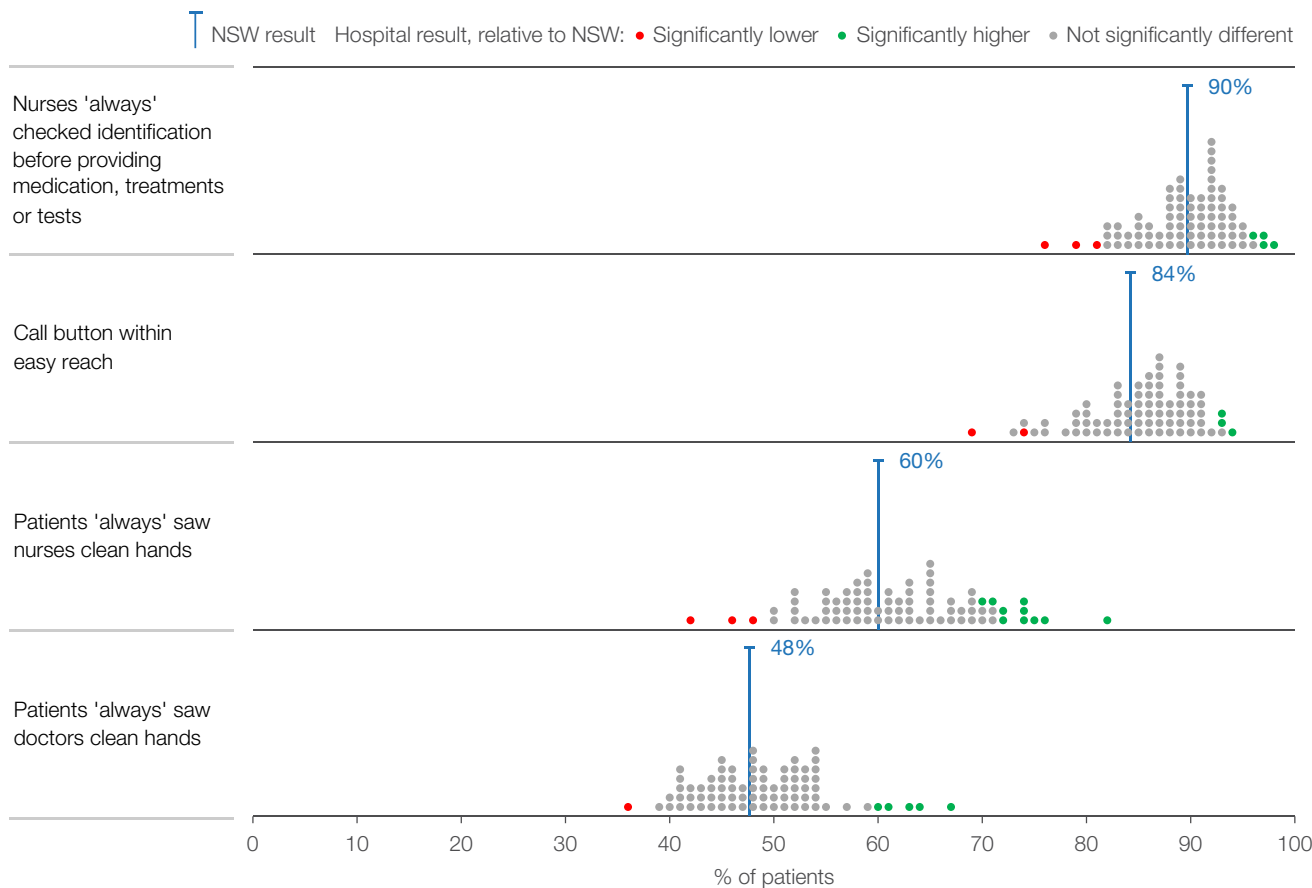


Figure 1.42 Safety and hygiene: Processes of care, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015



Patient-reported outcomes

Patients with disability responded less positively to questions about outcomes

Comparisons between patients with and without disability show less positive responses from the disability group in the percentage who said: they experienced a complication or problem (19% and 14%); the care and treatment they received 'definitely' helped them (74% and 80%); and the problem they went to hospital for was 'much better' (66% and 76%) (Figure 1.44). Certain complications – such as infections, negative reactions to medication, and pressure wounds – were also more often reported by patients with disability (Figure 1.43).

Notably however, patients with disability have intractable health issues and so patient-reported outcome results should be interpreted with care.

Among patients with disability, responses from those admitted to a hospital in Western NSW LHD were significantly more positive than the NSW result for the question regarding complications related to hospital care (Figure 1.45).

Comparing hospital-level responses provided by patients with disability, the widest variation was in the percentage who said the problem they went to hospital for was 'much better' (a 28 percentage point range, 53% to 81%) (Figure 1.46).

Figure 1.43 Patient-reported outcomes, by type and by patients with and without disability, NSW public hospitals, 2015

Type of complication	Patients with disability	Patients without disability
Any complication	19	14
Blood clot	2	1
Infection*	6	4
Complication from an operation or surgical procedure	4	3
Complication as a result of tests, x-rays or scans	1	1
Negative reaction to medication*	4	3
Fall	2	1
Pressure wound or bed sore*	2	1

Note: Multiple responses were possible, individual complications do not sum to total

Figure 1.44 Patient-reported outcomes, by patients with and without disability, NSW public hospitals, 2015

Question	Responses
Experienced complication or problem during or shortly after hospital stay (derived measure)*	<div> <div>■ None reported</div> <div>■ Experienced complication</div> </div> <div> <div>1+ condition</div> <div>81%</div> <div>19%</div> </div>
	<div> <div>None</div> <div>86%</div> <div>14%</div> </div>
Did the care and treatment received in hospital help you?*	<div> <div>■ Yes, definitely</div> <div>■ Yes, to some extent</div> <div>■ No, not at all</div> </div> <div> <div>1+ condition</div> <div>74%</div> <div>22%</div> <div></div> </div>
	<div> <div>None</div> <div>80%</div> <div>18%</div> <div></div> </div>
Is the problem you went to hospital for...?*	<div> <div>■ Much better</div> <div>■ A little better</div> <div>■ About the same</div> <div>■ A little worse</div> <div>■ Much worse</div> </div> <div> <div>1+ condition</div> <div>66%</div> <div>18%</div> <div>13%</div> <div></div> <div></div> </div>
	<div> <div>None</div> <div>76%</div> <div>14%</div> <div>8%</div> <div></div> <div></div> </div>

* There was a significant difference in the percentage of patients with and without disability who selected the response category or complication.

Note: The difference in patient-reported outcomes between patients with and without disability could be due to differences in underlying conditions, especially for patients with intellectual disability. People with certain congenital disabilities, such as Down syndrome, are more likely than people without disability to develop cancers, cardiac disease and other medical conditions.

Figure 1.45 Patient-reported outcomes, percentage of patients with disability who selected the most positive response category (no complications), LHD results relative to NSW, 2015

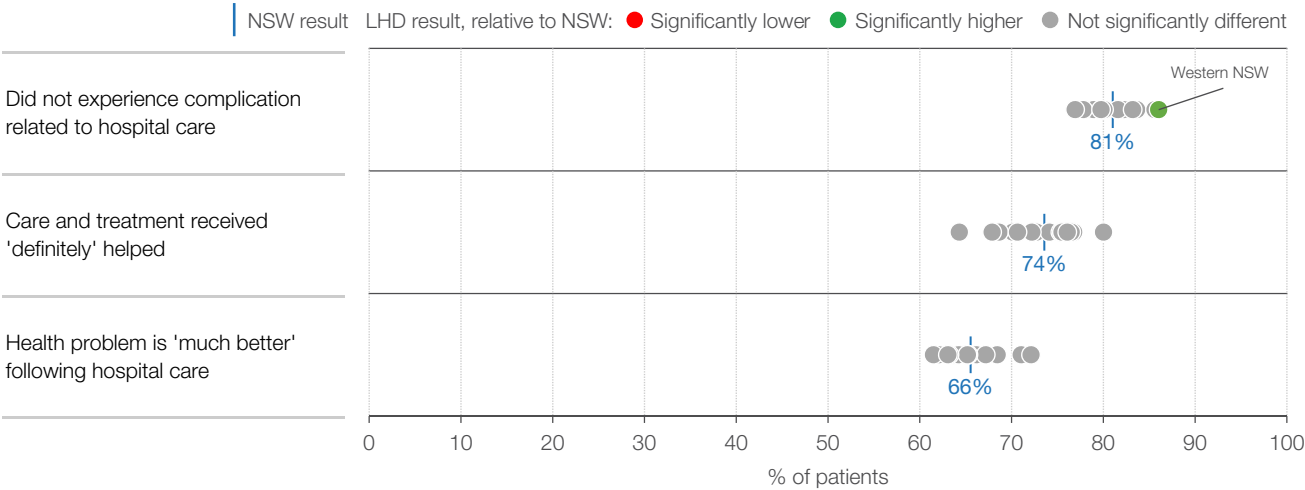
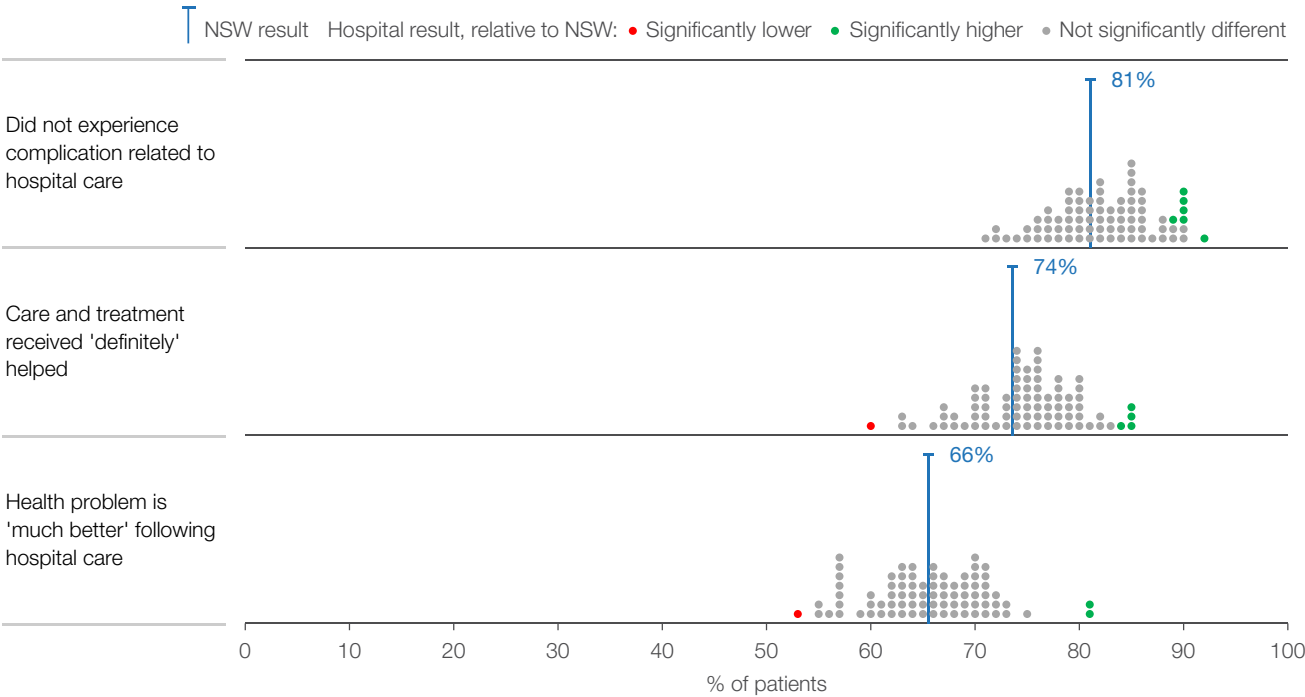


Figure 1.46 Patient-reported outcomes, percentage of patients with disability who selected the most positive response category (no complications), hospital results relative to NSW, 2015



SECTION 2

Synthesis of local health district and hospital results

Interpreting the graphs

Comparing patients with and without disability

Example 2.1: Gap graphs are used to compare differences between two groups. This example shows the percentage of patients in each LHD with and without disability who selected the most positive response category. The upper half of each rectangle shows an LHD result for patients with disability and the lower half for patients without

disability. Shading of the rectangle shows the statistical significance of the gap.

In this example, in Southern NSW, 79% of patients with disability would 'speak highly' of the hospital to family and friends, compared with 85% of patients without disability – a statistically significant difference.

Example Aspects of care, significant differences between the percentage of patients with and without disability, patients who selected the most positive response category, by LHD, 2015

LHD results:

92 — Disability group responses
94 — Other patients' responses

■ Disability group significantly less positive than other patients
□ No difference
□ Disability group significantly more positive than other patients
■ Data suppressed (< 30 responses)

		Central Coast	Far West	Hunter New England	Illawarra Shoalhaven	Mid North Coast	Murrumbidgee	Nepean Blue Mountains	Northern NSW	Northern Sydney	South Eastern Sydney	South Western Sydney	Southern NSW	St Vincent's Health Network	Sydney	Western NSW	Western Sydney
Overall experience of care	Would 'speak highly' of the hospital to friends and family	77	71	78	68	82	76	73	80	78	75	69	79	85	81	78	68
		81	75	79	77	84	77	73	83	80	81	75	85	86	83	83	73
	Overall, nurses were rated as 'very good'	73	65	75	73	80	75	63	75	72	69	59	78	77	64	73	59
		78	73	78	75	83	75	70	82	72	71	63	83	74	68	79	64
	Overall, doctors were rated as 'very good'	57	54	68	55	71	69	48	66	68	69	57	67	82	67	67	56
		67	65	71	66	75	67	66	72	71	72	64	76	69	74	75	63
	Overall, care in hospital was 'very good'	62	55	68	62	71	67	53	69	66	63	56	69	73	62	68	53
		68	64	71	67	76	69	66	74	70	66	58	75	66	64	75	56

Example 2.2: Pizza pies summarise statistically significant differences between patients with disability in each LHD compared with NSW overall.

Segments are shaded green or red if the result for the LHD was more or less positive (respectively) than the NSW result for patients with disability.

Example Aspects of care, percentage of patients who selected the most positive response category, patients with disability, LHD results relative to NSW, 2015

Coordination and continuity



1. Nurses 'always' knew enough about patient's care and treatment
2. Doctors 'always' knew enough about patient's medical history
3. At discharge, 'completely' adequate arrangements made for services needed
4. Told who to contact if worried about condition or treatment after discharge

Engagement and participation



1. 'Definitely' involved in decisions about care and treatment
2. 'Definitely' involved in decisions about discharge
3. Given 'completely' enough information to manage care at home

Compared with patients without disability, those with disability were:

■ Significantly higher than NSW ■ Significantly lower than NSW ■ Not significantly different ■ Data suppressed (<30 responses)

Coordination and continuity



Engagement and participation



Interpreting the graphs

Comparing with NSW

Example 2.3: A heat map table is used to shade results that are statistically significantly more positive (green) or less positive (red) than the NSW result. This heat map summarises results for patients with disability at a hospital level, providing the

percentage of patients with disability who selected the most positive response category, and whether that result is significantly different to the NSW result for patients with disability.

Example Aspects of care, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015

Hospital result, relative to NSW: ■ Significantly lower ■ Significantly higher ■ Not significantly different Data suppressed (<30 responses)

	NSW	Armidale and New England	Auburn	Ballina District	Bankstown / Lidcombe	Bateman's Bay District	Bathurst Base	Bellinger River District	Belmont	Blacktown
Would 'speak highly' of the hospital to friends and family	76	69	67	82	70	84	84	74	88	60
Overall, nurses were rated as 'very good'	70	75	50	72	60	82	79	77	80	54
Overall, doctors were rated as 'very good'	64	67	53	65	55	71	68	71	73	51
Overall, care in hospital was 'very good'	63	62	50	68	54	73	75	74	75	40
Time spent in the emergency department was 'about right'	67	80	63	75	58	77	64	97	75	53
Waited 'less than one month' to be admitted for surgical procedure	26	22		17	9	9	27		18	
Time waited to be admitted to hospital was 'about right'	60	50		63	59	54	55		52	
Discharge was not delayed	79	78	64	91	83	91	83	81	86	77
'Always' got the opportunity to talk to a doctor when needed	55	62	43	61	51	60	65	59	59	39
Health professionals 'completely' discussed worries or fears	37			37			36			
An interpreter was 'always' provided when needed	38									
Staff assisted within a reasonable time frame 'all of the time'	42	42	35	43	30	53	56	34	58	27
'Always' got enough help from staff to eat meals	40									
Hospital staff 'definitely' did everything to help manage pain	74	74	60	79	60	75	76	74	78	57
Nurses were 'always' kind and caring	84	86	75	89	84	92	90	89	89	71
Food 'always' suitable for dietary needs	58									
Staff 'completely' considered family and home situation when planning discharge	72	81	66	74	62	74	81	76	75	61
At discharge, felt well enough to leave hospital	90	93	82	97	92	98	93	92	91	92
Nurses 'always' knew enough about patient's care and treatment	72	71	51	73	69	82	75	72	80	54
Doctors 'always' knew enough about patient's medical history	67	72	68	71	68	69	69	67	74	56
At discharge, 'completely' adequate arrangements made for services needed	68	68	57	78	58	68	85	79	72	48
Told who to contact if worried about condition or treatment after discharge	84	84	89	82	82	86	82	79	90	74
'Definitely' involved in decisions about care and treatment	57	60	44	61	59	65	55	51	58	35

Overview of local health district results

Gaps between responses of patients with and without disability

The number and extent of gaps in responses at an LHD level indicate how well services are tailored to patients with disability compared with other patients (Figure 2.1).

In Far West and Mid North Coast LHDs and St Vincent's local health network, there were no questions with significant gaps.*

In Southern NSW, responses from patients with disability were significantly less positive than patients without disability for 12 of the 48 survey questions. Notably, patients without disability in Southern NSW responded more positively than those without disability in other districts, resulting in more significant gaps within Southern NSW.

Figure 2.1 Aspects of care, significant differences between the percentage of patients with and without disability, patients who selected the most positive response category, by LHD, NSW, 2015

LHD results:

92 — Disability group responses
94 — Other patients' responses

■ Disability group significantly less positive than other patients
■ No difference
□ Disability group significantly more positive than other patients
■ Data suppressed (< 30 responses)

		Central Coast	Far West	Hunter New England	Illawarra Shoalhaven	Mid North Coast	Murrumbidgee	Nepean Blue Mountains	Northern NSW	Northern Sydney	South Eastern Sydney	South Western Sydney	Southern NSW	St Vincent's Health Network	Sydney	Western NSW	Western Sydney
Overall experience of care	Would 'speak highly' of the hospital to friends and family	77 81	71 75	78 79	68 77	82 84	76 77	73 73	80 83	78 80	75 81	69 75	79 85	85 86	81 83	78 83	68 73
	Overall, nurses were rated as 'very good'	73 78	65 73	75 78	73 75	80 83	75 75	63 70	75 82	72 72	69 71	59 63	78 83	77 74	64 68	73 79	59 64
	Overall, doctors were rated as 'very good'	57 67	54 65	68 71	55 66	71 75	69 67	48 66	66 72	68 71	69 72	57 64	67 76	82 69	67 74	67 75	56 63
	Overall, care in hospital was 'very good'	62 68	55 64	68 71	62 67	71 76	67 69	53 66	69 74	66 70	63 66	56 58	69 75	73 66	62 64	68 75	53 56
Access and timeliness	Time spent in the emergency department was 'about right'	70 75	66 63	74 77	65 65	82 80	76 65	53 58	71 77	74 75	62 69	58 61	76 71	74 73	68 66	74 69	43 54
	Waited 'less than one month' to be admitted for surgical procedure	26 22	29 25	19 29	27 29	28 20	29 24	21 27	19 22	34 44	35 35	17 26	16 21	41 55	28 33	29 26	30 32
	Time waited to be admitted to hospital was 'about right'	66 56	58 59	55 66	61 62	60 51	60 65	53 62	60 65	70 74	58 70	52 57	57 60	63 78	68 71	61 64	60 65
	Discharge was not delayed	73 76	78 85	81 83	74 81	80 81	85 84	82 79	83 85	75 77	76 81	79 80	84 88	76 76	82 83	82 83	74 78
Assistance: Responsiveness	'Always' got the opportunity to talk to a doctor when needed	55 55	57 62	63 62	48 57	64 66	59 59	48 56	61 69	53 60	55 57	47 52	61 67	69 61	57 61	62 65	42 53
	Health professionals 'completely' discussed worries or fears	28 37	11 40	41 39	25 40	45 43	36 40	19 39	38 44	46 46	45 42	33 44	37 44	• 50	44 43	38 42	35 35
	An interpreter was 'always' provided when needed	• •	• •	• •	• •	• •	• •	• •	• •	27 53	38 44	• 41	• •	• •	• 38	• •	46 49
Assistance: Help when needed	Staff assisted within a reasonable time frame 'all of the time'	47 46	43 57	47 52	38 46	44 50	47 46	30 41	47 54	40 44	39 45	37 41	48 56	49 42	39 42	47 51	38 38
	'Always' got enough help from staff to eat meals	• •	• •	42 49	30 18	60 •	• •	• •	50 74	42 •	28 51	32 •	44 •	• •	• •	33 •	• •
	Hospital staff 'definitely' did everything to help manage pain	71 79	65 78	79 80	73 75	78 84	79 84	71 73	81 82	75 80	74 79	68 74	76 85	73 79	79 80	73 82	67 73
Comprehensive and whole-person care	Nurses were 'always' kind and caring	88 90	83 84	87 88	81 85	91 91	89 85	80 85	86 90	84 88	83 85	79 81	91 91	89 88	83 82	85 88	79 81
	Food 'always' suitable for dietary needs	69 57	73 •	63 60	47 54	62 53	69 62	50 63	60 57	51 49	54 63	55 57	66 56	• 46	78 52	54 69	49 61
	Staff 'completely' considered family and home situation when planning discharge	69 76	75 76	77 78	71 75	79 80	76 80	63 68	77 81	67 72	77 73	65 68	76 82	78 69	70 74	75 80	69 67
	At discharge, felt well enough to leave hospital	86 93	90 86	92 94	90 94	92 95	91 95	83 92	91 94	91 93	91 92	88 90	93 95	89 94	90 94	92 94	86 91

* Both Far West and St Vincent's have a small sample size and there is limited statistical power to detect significant differences.

		Central Coast	Far West	Hunter New England	Illawarra Shoalhaven	Mid North Coast	Murrumbidgee	Nepean Blue Mountains	Northern NSW	Northern Sydney	South Eastern Sydney	South Western Sydney	Southern NSW	St Vincent's Health Network	Sydney	Western NSW	Western Sydney
Coordination and continuity	Nurses 'always' knew enough about patient's care and treatment	71 79	67 74	77 80	71 75	78 80	75 76	61 73	76 82	71 75	71 75	68 73	77 82	75 78	72 75	74 80	61 68
	Doctors 'always' knew enough about patient's medical history	58 69	60 65	71 72	62 72	73 76	67 72	56 64	68 74	67 72	71 73	69 70	70 76	77 80	71 78	71 76	60 70
	At discharge, 'completely' adequate arrangements made for services needed	65 72	79 78	74 72	65 72	76 78	70 74	70 70	69 78	66 68	75 70	66 68	73 76	60 65	69 74	73 76	51 69
	Told who to contact if worried about condition or treatment after discharge	77 86	84 90	87 89	82 88	87 89	85 87	83 85	87 89	83 86	88 85	83 87	87 90	80 83	84 89	82 88	82 85
Engagement and participation	'Definitely' involved in decisions about care and treatment	58 59	53 64	60 64	47 64	61 65	59 60	40 62	64 69	58 62	59 60	54 59	64 67	60 62	65 67	61 67	45 56
	'Definitely' involved in decisions about discharge	67 66	60 64	69 70	58 65	67 75	72 75	56 69	69 72	60 64	60 64	56 58	69 74	64 62	58 65	67 72	46 60
	Given 'completely' enough information to manage care at home	64 73	75 73	72 77	67 74	78 80	79 75	59 72	73 75	69 71	80 72	71 71	77 80	75 69	74 75	74 76	68 70
	Given 'right amount' of information about condition or treatment during stay	79 84	78 82	83 86	80 85	83 87	84 85	72 82	85 89	80 88	85 86	81 84	85 90	91 85	86 88	83 87	78 84
Provision of information	Family or someone close given 'right amount' of information about condition or treatment	80 84	78 82	76 79	75 80	78 81	77 81	71 75	79 81	77 82	76 81	77 80	82 83	76 85	84 85	76 82	77 82
	While in hospital, received or saw information about patients' rights	36 36	42 35	48 46	36 39	36 35	35 32	37 36	42 42	40 34	39 36	38 34	55 54	48 37	39 42	32 39	26 38
	'Completely' informed about medication side effects to watch for	48 52	45 59	55 53	42 56	51 49	47 54	38 47	50 61	44 52	53 51	52 55	52 56	49 49	55 54	61 55	40 54
	Did not experience unfair treatment	92 96	92 93	93 97	94 95	95 97	95 97	93 93	94 96	91 97	91 97	90 95	95 98	93 95	95 96	93 97	92 95
Respect and dignity	'Always' treated with respect and dignity	83 90	83 85	88 88	83 87	91 92	87 88	81 88	86 90	86 90	83 89	84 84	88 92	91 90	88 87	87 90	76 83
	'Always' given enough privacy when being examined or treated	87 90	80 90	89 89	82 88	90 91	84 85	77 87	87 89	85 89	82 88	89 85	89 91	89 88	88 89	86 89	82 85
	'Always' given enough privacy when discussing condition or treatment	75 82	75 84	80 82	74 79	85 85	75 76	68 81	79 83	79 82	77 82	79 79	83 84	84 80	82 84	80 84	76 81
	Staff seen on arrival were 'always' polite and courteous	96 97	94 91	95 96	97 95	97 96	94 95	90 88	96 97	89 94	92 92	93 91	93 96	92 97	91 91	93 96	90 88
Politeness and courtesy	Emergency department staff were 'always' polite and courteous	89 93	76 86	92 90	87 86	95 94	91 84	84 85	90 89	91 92	91 86	77 92	91 92	97 92	86 88	90 91	79 82
	Nurses 'always' answered questions in an understandable way	79 82	76 78	79 85	71 82	83 87	77 79	67 80	81 87	76 80	77 78	68 75	83 87	85 84	77 77	79 86	64 75
	Doctors 'always' answered questions in an understandable way	68 74	65 73	74 78	68 75	77 80	70 75	57 79	76 79	74 82	74 77	71 74	79 83	85 80	73 80	73 82	64 72
	'Always' had confidence and trust in nurses	84 87	76 84	87 86	83 86	89 90	87 86	74 83	83 90	85 84	82 84	79 81	87 90	90 83	83 82	82 87	74 79
Confidence and trust	'Always' had confidence and trust in doctors	72 79	66 81	82 73	79 79	82 85	81 84	67 80	79 83	80 84	80 83	77 80	82 88	89 87	84 88	81 86	78 78
	Wards or rooms were 'very clean'	71 74	58 64	72 73	68 73	77 80	62 64	55 65	74 78	71 63	65 64	75 74	72 77	62 74	75 77	57 57	
	Toilets and bathrooms were 'very clean'	67 58	56 60	65 66	62 68	72 72	61 58	47 53	70 71	63 63	55 56	53 53	68 71	67 70	54 52	68 71	44 50
	Nurses 'always' asked patient's name or checked ID band before giving medications/treatments/tests	93 94	81 88	90 91	87 93	95 91	92 91	84 93	92 91	91 92	88 90	89 90	90 91	89 91	93 90	88 91	85 90
Safety and hygiene: Physical amenities	Call button was 'always' placed within easy reach	81 85	80 90	86 87	79 81	89 88	89 85	76 86	87 87	85 87	86 87	85 84	89 88	88 86	85 85	82 87	80 84
	'Always' saw nurses wash their hands or use clean gloves	57 60	58 63	60 64	61 60	65 63	64 59	58 55	63 61	56 49	61 58	61 64	58 59	59 62	63 64	51 54	51 54
	'Always' saw doctors wash their hands or use clean gloves	42 46	44 53	47 50	44 48	50 49	51 47	43 42	49 49	46 39	52 51	50 55	47 52	48 52	51 57	51 52	43 50
	Did not experience complication related to hospital care	80 86	79 88	82 87	77 85	84 87	82 88	80 85	79 86	82 87	78 87	80 86	83 87	77 82	80 87	86 87	86 84
Patient-reported outcomes	Care and treatment received 'definitely' helped	73 81	64 72	74 79	70 78	76 81	72 76	69 78	77 79	76 80	71 83	75 78	75 82	80 82	75 82	76 81	68 79
	Health problem 'much better' following hospital care	68 80	62 72	66 76	61 77	67 73	64 75	64 76	65 76	71 77	65 79	64 73	64 76	72 73	65 79	63 77	63 72

Overview of local health district results

Variation in responses of patients with disability: LHDs relative to NSW*

Figure 2.2 Aspects of care, percentage of patients with disability who selected the most positive response category, LHD results relative to NSW, 2015



* Refer to page 51 for how to interpret this graph

LHD result, relative to NSW:

 Significantly higher than NSW
  Significantly lower than NSW
  Not significantly different
  Data suppressed (<30 responses)



Overview of hospital results

Variation in responses of patients with disability: Hospitals relative to NSW

Figure 2.3 Aspects of care, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015

		NSW	Armidale and New England	Auburn	Ballina District	Bankstown/Lidcombe	Bateman's Bay District	Bathurst Base	Bega District*	Bellinger River District	Belmont
Overall experience of care	Would 'speak highly' of the hospital to friends and family	76	69	67	82	70	84	84	74	74	88
	Overall, nurses were rated as 'very good'	70	75	50	72	60	82	79	87	77	80
	Overall, doctors were rated as 'very good'	64	67	53	65	55	71	68	69	71	73
	Overall, care in hospital was 'very good'	63	62	50	68	54	73	75	71	74	75
Access and timeliness	Time spent in the emergency department was 'about right'	67	80	63	75	58	77	64	75	97	75
	Waited 'less than one month' to be admitted for surgical procedure	26	22		17	9	9	27	23		18
	Time waited to be admitted to hospital was 'about right'	60	50		63	59	54	55	61		52
	Discharge was not delayed	79	78	64	91	83	91	83	80	81	86
Assistance: Responsiveness	'Always' got the opportunity to talk to a doctor when needed	55	62	43	61	51	60	65	61	59	59
	Health professionals 'completely' discussed worries or fears	37			37			36			
	An interpreter was 'always' provided when needed	38									
Assistance: Help when Needed	Staff assisted within a reasonable time frame 'all of the time'	42	42	35	43	30	53	56	40	34	58
	'Always' got enough help from staff to eat meals	40									
	Hospital staff 'definitely' did everything to help manage pain	74	74	60	79	60	75	76	84	74	78
Comprehensive and whole-person care	Nurses were 'always' kind and caring	84	86	75	89	84	92	90	95	89	89
	Food 'always' suitable for dietary needs	58									
	Staff 'completely' considered family and home situation when planning discharge	72	81	66	74	62	74	81	78	76	75
	At discharge, felt well enough to leave hospital	90	93	82	97	92	98	93	93	92	91
Coordination and continuity	Nurses 'always' knew enough about patient's care and treatment	72	71	51	73	69	82	75	83	72	80
	Doctors 'always' knew enough about patient's medical history	67	72	68	71	68	69	69	72	67	74
	At discharge, 'completely' adequate arrangements made for services needed	68	68	57	78	58	68	85	74	79	72
	Told who to contact if worried about condition or treatment after discharge	84	84	89	82	82	86	82	88	79	90
Engagement and participation	'Definitely' involved in decisions about care and treatment	57	60	44	61	59	65	55	67	51	58
	'Definitely' involved in decisions about discharge	62	71	56	76	58	71	69	69	66	67
	Given 'completely' enough information to manage care at home	72	77	64	81	64	79	82	79	69	68
Provision of information	Given 'right amount' of information about condition or treatment during stay	82	79	87	85	80	86	80	89	75	87
	Family or someone close given 'right amount' of information about condition or treatment	77	81	71	80	80	87	74	86	73	77
	While in hospital, received or saw information about patients' rights	39	44	26	34	46	44	51	55	64	56
	'Completely' informed about medication side effects to watch for	50	37		43	35	40	62	52		54
Respect and dignity	Did not experience unfair treatment	93	96	95	93	92	99	96	96	91	94
	'Always' treated with respect and dignity	85	90	76	89	78	91	89	88	84	91
	'Always' given enough privacy when being examined or treated	86	88	89	88	83	85	91	90	89	86
	'Always' given enough privacy when discussing condition or treatment	79	79	74	83	75	84	83	84	77	81
Politeness and courtesy	Staff seen on arrival were 'always' polite and courteous	93	95		95	92	97	97	90	96	100
	Emergency department staff were 'always' polite and courteous	88	83	82	93	77	94	92	89	100	91
Understandable communication	Nurses 'always' answered questions in an understandable way	75	84	57	82	67	81	85	88	78	89
	Doctors 'always' answered questions in an understandable way	72	79	51	71	69	87	72	74	75	77
Confidence and trust	'Always' had confidence and trust in nurses	83	84	68	87	77	88	86	91	84	88
	'Always' had confidence and trust in doctors	79	77	75	81	76	86	83	81	77	86
Safety and hygiene: Physical amenities	Wards or rooms were 'very clean'	67	65	55	78	61	81	78	70	83	71
	Toilets and bathrooms were 'very clean'	60	57	45	78	51	77	74	60	76	74
Safety and hygiene: Processes of care	Nurses 'always' asked checked ID band before giving medications/treatments/tests	90	86	88	88	83	87	92	93	82	92
	Call button was 'always' placed within easy reach	84	85	69	89	80	89	89	88	86	87
	'Always' saw nurses wash their hands or use clean gloves	60	55	55	63	56	60	72	65	65	61
	'Always' saw doctors wash their hands or use clean gloves	48	41	41	55	48	46	54	51	54	53
Patient-reported outcomes	Did not experience complication related to hospital care	81	83	79	87	77	85	80	81	71	82
	Care and treatment received 'definitely' helped	74	76	74	75	75	67	84	78	78	76
	Health problem 'much better' following hospital care	66	70	81	64	67	63	70	64	69	62

* South East Regional Hospital replaced Bega District Hospital in March 2016

Hospital result, relative to NSW: ■ Significantly lower ■ Significantly higher ■ Not significantly different □ Data suppressed (<30 responses)

	Blacktown	Blue Mountains District	Bowral and District	Broken Hill Base	Calvary Mater Newcastle	Camden	Campbelltown	Canterbury	Casino and District Memorial	Cessnock District	Coffs Harbour Base	Concord	Cooma Health Service	Cowra District	Deniliquin Health Service	Dubbo Base	Fairfield	Forbes District	Gosford	Goulburn Base	Grafton Base	Griffith Base	Gunnedah District	Hornsby and Ku-ring-gai	Inverell District	John Hunter	Kempsey	Kurri Kurri District	Lismore Base	Lithgow Health Service	Liverpool
	60	82	76	71	81	82	68	70	79	79	80	86	86	74	84	71	65	81	75	79	75	77	78	80	79	73	83	88	79	81	69
	54	79	74	65	74	77	63	59	77	79	77	69	81	69	80	70	60	72	72	72	74	78	68	73	71	72	82	85	76	79	52
	51	66	67	54	69	49	56	56	63	56	68	73	72	68	78	57	55	65	57	63	65	63	71	71	66	67	68	79	66	74	59
	40	73	65	55	70	70	51	48	68	62	67	69	74	67	73	59	53	68	61	63	69	71	77	69	66	64	75	82	71	75	60
	53	84	83	66	77		64	77	59	84	82		79	82	88	74		95	64	83	77	68	78	75	77	75	85		67	73	53
			25	29	32				13	26	32	27	17	35	20	20	9		29	7	22			25		20	6	11	15	25	
			60	58	77				64	58	49	60	59	81	72	54			60	44	55			72		49	40	41	65	55	
	77	75	84	78	81	93	70	80	90	88	80	84	91	87	93	79	83	84	72	84	89	84	88	72	88	77	83	94	85	87	77
	39	55	65	57	71	60	50	52	62	63	61	66	73	66	75	51	57	69	51	55	53	50	74	60	62	66	63	70	58	68	37
		36	31	11	60		40				44								21	46	31					44			45		
	27	43	54	43	48	46	37	40	53	45	45	46	50	43	53	37	43	54	46	52	46	48	54	40	49	48	59	69	40	52	37
	57	77	79	65	81		72	75	75	71	79	87	80	63	86	71	71	81	78	74	74	76	68	77	83	81	85	84	80	75	70
	71	86	89	83	87	91	76	73	87	92	89	89	94	78	94	82	75	86	87	89	83	87	84	84	86	84	94	95	84	89	76
		65		73	71						67																				
	61	71	77	75	74	80	65	64	78	84	77	79	74	67	86	73	66	68	67	80	78	80	77	72	68	76	85	88	75	76	65
	92	86	93	90	88	94	81	84	89	92	92	94	88	88	94	91	83	92	87	94	91	86	93	92	89	92	91	98	86	88	89
	54	73	76	67	78	77	60	69	79	76	76	80	81	71	75	70	67	79	70	73	75	72	78	72	82	72	82	89	75	82	70
	56	57	68	60	67	72	56	69	66	73	71	79	71	69	79	66	75	64	59	71	70	59	73	69	81	70	72	89	68	77	74
	48	63	80	79	79	72	61	72	71	69	77	74	73	63	78	67	68	68	67	77	55	76	69	66	65	71	83	79	65	83	71
	74	79	80	84	92	81	81	87	88	93	88	86	86	77	89	79	86	73	79	90	87	85	87	90	78	87	88	93	88	84	85
	35	55	61	53	66	62	49	53	66	64	58	67	65	66	65	59	53	61	61	63	59	53	64	57	56	58	62	75	66	61	51
	47	65	70	60	64	62	57	54	66	71	66	58	73	68	74	59	58	77	68	68	74	67	74	62	62	71	75	77	62	70	51
	59	74	74	75	68	74	68	72	77	82	77	76	82	70	80	68	73	69	63	78	74	81	77	67	75	70	79	88	66	77	77
	79	80	83	78	83	80	81	77	77	86	81	91	88	84	90	79	86	83	82	82	87	86	88	82	79	83	82	96	83	80	81
	66	78	80	78	78	74	67	78	66	82	78	88	80	74	82	70	81	79	85	82	78	85	78	72	82	71	81	90	77	89	79
	36	32	41	42	49	42	40	35	48	52	32	44	55	37	38	33	43	29	32	67	43	33	53	39	37	49	43	53	44	44	29
	37	43	58	45	52		35	55	52	34	45	65	67	45	63	54	51		53	53	54	50		47	46	61	59	64	48	56	68
	90	89	94	92	96	94	88	88	95	98	93	95	94	88	97	89	89	93	93	94	91	93	90	89	95	90	97	95	94	95	90
	69	86	90	83	89	92	81	81	90	87	92	94	93	82	94	85	78	87	80	90	85	90	82	82	89	85	92	93	81	87	89
	78	90	84	80	90	89	80	78	89	89	90	91	96	86	88	84	84	86	82	90	87	85	90	89	78	90	92	90	85	89	82
	68	79	75	75	82	79	78	81	85	79	84	84	89	76	82	76	89	79	74	81	78	73	84	82	78	81	84	87	77	82	80
		88	97	94	100	94	87		97	98	99	92	98	95	93	82	88	89	98	92	100	100	98	92	98	92	97	97	97	93	
	76	91	94	76	96		78	83	96	91	97		96	82	97	93		90	86	92	91	89	84	88	91	92	96		88	95	73
	57	84	81	76	77		70	71	85	78	83	79	91	76	80	71	71	76	78	82	83	74	87	78	83	77	83	87	78	78	65
	68	81	74	65	80	81	68	67	76	79	74	77	84	73	78	70	67	76	68	76	74	63	76	79	79	71	75	86	83	84	74
	68	85	83	76	86	83	80	82	83	90	86	88	93	75	90	80	75	89	81	81	83	89	84	83	85	85	93	96	81	87	80
	68	76	84	66	77	71	74	79	83	80	78	87	87	80	89	82	76	82	70	79	74	78	86	79	81	84	84	96	76	89	78
	46	74	74	58	77	83	60	70	81	74	71	68	84	70	85	63	62	74	62	70	79	64	89	63	69	68	70	89	68	77	69
	38	66	69	56	68	73	59	59	72	66	68	57	79	65	81	58	47	67	58	64	75	58	79	49	66	62	65	85	66	78	51
	76	89	92	81	84	98	83	90	94	86	97	95	86	79	95	89	91	94	92	94	96	92	93	90	89	93	92	97	91	93	95
	73	79	83	80	83	91	81	83	87	90	91	91	89	82	93	74	85	87	79	94	86	90	84	83	90	86	84	92	78	91	89
	46	55	57	58	65	82	52	62	63	56	63	69	50	61	65	62	74	57	54	57	63	76	74	59	70	53	65	75	67	70	64
	40	45	40	44	52	45	45	49	53	45	46	59	41	51	53	47	64	41	42	48	49	54	57	46	45	42	52	47	52	52	53
	86	82	89	79	82	74	76	86	77	79	82	85	89	90	86	82	81	86	79	83	75	85	72	80	85	80	90	86	77	82	82
	60	80	76	64	68	75	75	71	73	70	74	79	71	70	78	74	78	76	74	78	77	79	73	79	69	74	82	85	72	76	74
	55	71	68	62	57	57	72	70	61	62	66	61	57	66	57	71	64	69	71	68	66	63	60	67	55	67	65	81	60	68	57

Overview of hospital results

Variation in responses of patients with disability: Hospitals relative to NSW

Figure 2.3 Aspects of care, percentage of patients with disability who selected the most positive response category, hospital results relative to NSW, 2015

		NSW	Macksville District	Maclean District	Maitland	Manly District	Manning Base	Milton and Ulladulla	Mona Vale and District	Moree District	Moruya District
Overall experience of care	Would 'speak highly' of the hospital to friends and family	76	90	88	78	80	81	78	76	83	77
	Overall, nurses were rated as 'very good'	70	90	84	74	78	78	79	69	75	73
	Overall, doctors were rated as 'very good'	64	74	65	65	73	70	69	56	64	65
	Overall, care in hospital was 'very good'	63	82	77	62	75	75	72	61	75	68
Access and timeliness	Time spent in the emergency department was 'about right'	67	75	82	66	82	73	76	75		77
	Waited 'less than one month' to be admitted for surgical procedure	26	14		14		7				30
	Time waited to be admitted to hospital was 'about right'	60	58		55		48				82
	Discharge was not delayed	79	90	84	75	81	81	83	72	95	82
Assistance: Responsiveness	'Always' got the opportunity to talk to a doctor when needed	55	73	71	52	64	59	58	51	76	61
	Health professionals 'completely' discussed worries or fears	37		41	22		37		37		37
	An interpreter was 'always' provided when needed	38									
Assistance: Help when Needed	Staff assisted within a reasonable time frame 'all of the time'	42	62	53	34	49	52	45	33	60	48
	'Always' got enough help from staff to eat meals	40									
	Hospital staff 'definitely' did everything to help manage pain	74	80	85	82	84	75	77	74		77
Comprehensive and whole-person care	Nurses were 'always' kind and caring	84	94	90	89	90	84	86	83	89	87
	Food 'always' suitable for dietary needs	58					54				
	Staff 'completely' considered family and home situation when planning discharge	72	81	83	80	82	78	65	72	74	65
	At discharge, felt well enough to leave hospital	90	96	94	92	96	90	88	91	93	90
Coordination and continuity	Nurses 'always' knew enough about patient's care and treatment	72	85	77	80	77	77	66	67	83	67
	Doctors 'always' knew enough about patient's medical history	67	78	71	72	68	68	53	59	78	65
	At discharge, 'completely' adequate arrangements made for services needed	68	80	81	71	84	72	73	75	87	76
	Told who to contact if worried about condition or treatment after discharge	84	90	85	83	87	84	78	79	88	80
Engagement and participation	'Definitely' involved in decisions about care and treatment	57	73	58	50	67	64	57	54	63	58
	'Definitely' involved in decisions about discharge	62	77	80	73	77	65	58	62	81	71
	Given 'completely' enough information to manage care at home	72	90	80	70	83	70	76	77	80	69
Provision of information	Given 'right amount' of information about condition or treatment during stay	82	91	89	84	87	81	83	83	87	85
	Family or someone close given 'right amount' of information about condition or treatment	77	80	81	82	84	71	72	77	76	81
	While in hospital, received or saw information about patients' rights	39	50	61	45	44	45	46	36	45	47
	'Completely' informed about medication side effects to watch for	50	56	60	53	56	39	50	49		52
Respect and dignity	Did not experience unfair treatment	93	95	92	96	97	90	91	92	91	93
	'Always' treated with respect and dignity	85	93	92	89	92	88	87	87	92	86
	'Always' given enough privacy when being examined or treated	86	91	92	92	87	88	84	81	95	87
	'Always' given enough privacy when discussing condition or treatment	79	87	85	80	78	79	74	79	90	87
Politeness and courtesy	Staff seen on arrival were 'always' polite and courteous	93	98	98	95		96			96	94
	Emergency department staff were 'always' polite and courteous	88	95	95	94	97	91	88	89		88
Understandable communication	Nurses 'always' answered questions in an understandable way	75	87	83	74	81	79	74	73	89	82
	Doctors 'always' answered questions in an understandable way	72	82	73	72	81	79	74	76	75	79
Confidence and trust	'Always' had confidence and trust in nurses	83	95	89	89	83	87	82	80	86	87
	'Always' had confidence and trust in doctors	79	86	80	82	86	80	79	76	80	82
Safety and hygiene: Physical amenities	Wards or rooms were 'very clean'	67	77	85	71	63	79	70	62	73	78
	Toilets and bathrooms were 'very clean'	60	74	76	53	57	72	67	46	68	70
Safety and hygiene: Processes of care	Nurses 'always' asked checked ID band before giving medications/treatments/tests	90	93	92	90	89	88	82	91	92	85
	Call button was 'always' placed within easy reach	84	91	87	85	85	86	83	80	87	83
	'Always' saw nurses wash their hands or use clean gloves	60	72	71	69	52	68	59	50	71	63
	'Always' saw doctors wash their hands or use clean gloves	48	52	52	50	39	48	48	36	54	45
Patient-reported outcomes	Did not experience complication related to hospital care	81	90	78	84	90	81	83	83	86	84
	Care and treatment received 'definitely' helped	74	80	80	76	75	77	75	80	81	79
	Health problem 'much better' following hospital care	66	66	62	70	69	71	56	73	72	63

Hospital result, relative to NSW: ■ Significantly lower ■ Significantly higher ■ Not significantly different Data suppressed (<30 responses)

	Mount Druitt	Mudgee District	Murwillumbah District	Muswellbrook District	Narrabri District	Nepean	Orange Health Service	Parkes District	Port Macquarie Base	Prince of Wales	Queanbeyan Health Service	Royal Hospital for Women	Royal North Shore	Royal Prince Alfred	Ryde	Shellharbour	Shoalhaven District Memorial	Singleton District	St George	St Vincent's	Sutherland	Sydney/Sydney Eye	Tamworth Base	The Tweed	Tumut Health Service	Wagga Wagga Base	Westmead	Wollongong	Wyong	Young Health Service
85	82	91	76	79	71	81	69	82	80	80	83	82	80	66	78	82	92	70	85	73	82	76	80	77	73	71	61	79	87	
81	84	84	77	81	59	72	70	82	80	73	71	75	61	59	69	81	79	59	77	68	75	74	73	77	72	62	71	74	80	
75	74	77	69	79	43	75	55	74	73	71	91	72	65	58	60	67	79	62	82	65	81	63	64	68	69	58	49	58	69	
74	75	83	69	73	48	71	61	71	69	69	76	68	59	53	66	75	77	57	73	59	70	72	65	76	64	57	56	65	77	
	84	63		68	46	73	78	82	55	57		73		69	80	74	71	66	74	63		71	73	91	74	32	60	76	91	
30	37	5				35	55	33	36				31		18	24			41		32	16	26		31			22	12	
66	68	57				65	94	80	64			77		61	54			63		53	62	56		59			75	64		
81	92	86	97	93	82	80	90	78	81	74	81	75	81	73	71	85	92	73	76	75	78	81	77	91	83	74	72	74	89	
52	76	66	66	69	45	64	69	66	61	64		52	49	44	53	56	72	51	69	48	62	57	65	68	58	43	45	60	70	
					16	45		50	51	30		37				41		45		39		33					18	38		
56	61	61	57	56	26	46	54	38	44	49		44	32	30	47	47	63	31	49	33	62	40	50	61	44	43	33	48	51	
73	73	81	77	79	70	75	57	76	81	66		74	75	73	71	86	74	70	73	79	63	72	85	75	79	73	70	64	78	
88	91	90	86	94	78	85	86	92	90	86	82	85	79	74	90	88	93	76	89	82	87	90	86	90	89	82	76	90	89	
															66	63		49				58						53		
67	77	75	84	70	61	77	74	79	85	75		60	64	68	76	83	92	72	78	80	73	75	80	71	73	73	66	70	81	
98	95	92	94	88	83	92	91	92	96	87		90	87	91	93	91	99	85	89	91	98	94	94	87	92	83	89	85	88	
78	76	82	72	84	57	76	75	79	79	76	79	72	66	69	79	73	81	66	75	66	77	81	77	70	75	64	68	72	79	
73	75	71	72	79	53	77	57	75	73	74	83	70	65	64	65	68	88	66	77	68	83	66	65	71	67	59	59	55	68	
67	69	76	78	66	69	74	71	71	81	60		59	63	72	66	80	73	69	60	80	72	84	74	66	67	50	58	63	74	
91	81	83	94	89	83	87	80	84	92	85	100	83	81	80	84	85	87	82	80	91	93	85	88	88	84	84	80	74	89	
68	72	66	62	74	36	63	67	63	71	61	77	60	66	47	58	54	70	48	60	52	71	63	63	67	58	48	43	54	64	
65	80	71	74	76	53	70	62	66	65	62		55	59	62	61	68	81	52	64	60	75	66	73	78	74	42	54	66	69	
73	76	75	83	83	55	76	78	78	82	75	87	65	72	68	78	77	85	78	75	72	87	75	77	74	79	73	60	65	77	
88	89	88	83	89	70	87	84	84	85	83	88	78	84	81	86	82	92	85	91	84	87	83	86	80	83	76	78	74	84	
84	84	70	80	84	68	79	83	78	82	72		76	81	79	79	81	87	68	76	79	86	79	84	76	73	83	73	74	83	
44	56	67	48	54	37	37	37	36	44	43		41	37	39	45	37	54	32	48	39	44	50	33	43	34	18	33	39	47	
46	61	61			36	68		54	51			41	47	39	52	44	61	50	49	42	70	54	51	79	42	39	37	42	48	
92	95	92	93	94	93	94	92	98	95	91	87	91	96	88	92	96	95	89	93	89	96	97	95	94	95	93	93	92	96	
89	89	89	85	89	80	90	83	90	92	83	83	89	83	80	90	87	91	76	91	81	91	87	87	91	84	78	80	86	90	
83	83	85	80	95	74	85	82	89	87	84	98	90	88	85	89	86	89	81	89	87	85	87	90	92	82	82	78	94	95	
81	78	83	79	86	66	83	81	85	79	77	92	82	80	70	83	80	82	73	84	79	81	75	77	85	73	80	70	78	86	
91	91	99	92	96	90	99	91	95	93	95	97	86	91	91	94	97	94	91	92	93	92	95	93	98	93	91	98	94	96	
	91	89	100	98	82	89	85	93	92	86		95		76	91	95	80	90	97	96	81	93	90	96	91	81	84	94	96	
83	87	85	75	90	64	83	79	83	86	77	78	79	77	59	72	79	84	72	85	71	80	77	84	83	77	68	68	80	84	
77	83	79	79	85	51	75	73	81	72	80		72	71	65	72	75	84	75	85	70	83	64	72	78	70	64	65	68	75	
87	92	90	86	91	71	81	81	90	90	86	82	90	79	76	90	85	91	75	90	80	90	90	83	88	86	77	81	87	88	
86	84	86	78	90	63	81	72	86	82	81	90	83	83	71	79	83	87	75	89	82	87	83	81	80	81	82	78	74	78	
66	81	90	69	93	50	83	69	84	74	76	73	81	55	63	65	77	78	52	72	64	69	68	72	83	55	53	65	82	88	
55	71	75	65	92	41	74	65	78	62	72	77	77	50	53	58	73	82	50	67	53	57	60	68	77	55	45	59	78	88	
96	90	92	88	92	82	85	84	94	89	85	90	93	91	88	90	89	88	89	89	83	92	91	91	93	92	88	85	94	87	
89	86	88	93	88	74	86	76	86	87	80		90	81	75	79	87	87	84	88	84	89	87	93	85	89	85	76	82	90	
56	71	68	70	58	58	69	59	67	62	42	52	60	58	48	65	67	66	61	59	58	65	55	57	74	59	52	59	61	69	
50	63	51	50	46	42	53	49	54	60	46	48	51	44	47	51	49	67	49	48	43	54	43	44	61	48	44	41	43	54	
76	84	84	89	90	80	92	88	84	76	79	79	81	73	78	85	78	90	72	77	85	88	85	80	85	80	88	75	81	85	
68	78	76	74	77	66	76	63	76	73	74	83	75	73	77	71	80	85	63	80	71	85	70	82	67	70	70	67	71	74	
65	57	70	64	64	63	53	62	70	67	65	71	73	67	69	66	68	75	60	72	70	71	63	69	57	65	63	59	66	64	

SECTION 3

Exploring the effect of multiple conditions and other long-term health issues

Results at a glance: Multiple conditions

Comparisons between patients with only one of the five disability conditions show that, overall, patients with a hearing impairment answered most positively and those with a neurological condition answered least positively.

Examining responses from patients with each of the disability conditions alone, alongside responses from patients with each condition plus one or more additional disability condition or longstanding illness,

Figure 3.1 Results for all questions, percentage of patients who selected the most positive response category: Patients with a single condition and multiple conditions, relative to those without disability, NSW, 2015

Result relative to patients without disability:

■ Significantly lower ■ Significantly higher ■ Not significantly different □ Data suppressed (<30 responses)

	Only condition					Condition plus other					Without disability	NSW overall
	Deafness	Blindness	Physical condition	Learning disability	Neurological	Deafness	Blindness	Physical condition	Learning disability	Neurological		
Would 'speak highly' of the hospital to friends and family	82	80	76	76	71	76	70	73	65	70	80	78
Overall, nurses were rated as 'very good'	76	71	71	68	62	70	65	67	64	64	73	71
Overall, doctors were rated as 'very good'	66	70	67	67	57	63	63	61	59	58	69	68
Overall, care in hospital was 'very good'	69	69	64	69	57	64	57	60	54	58	67	65
Time spent in the emergency department was 'about right'	69	65	65	66	61	68	69	65	62	66	67	68
Waited 'less than one month' to be admitted for surgical procedure	27	22	22	10	34	30	38	25	20	31	28	29
Time waited to be admitted to hospital was 'about right'	64	66	59	52	83	61	59	58	49	63	64	64
Discharge was not delayed	83	80	81	71	81	78	77	75	77	72	82	80
'Always' got the opportunity to talk to a doctor when needed	64	61	57	58	47	55	54	51	46	47	58	58
Health professionals 'completely' discussed worries or fears	49	21	39	47	32	33	38	34	34	27	42	40
An interpreter was 'always' provided when needed			27			40	39	37			47	43
Staff assisted within a reasonable time frame 'all of the time'	51	49	43	43	35	42	42	38	35	34	46	44
'Always' got enough help from staff to eat meals	53		39		52	37	35	37	49	33	53	44
Hospital staff 'definitely' did everything to help manage pain	85	77	75	78	73	76	69	68	69	67	79	77
Nurses were 'always' kind and caring	91	80	83	83	82	85	81	81	85	79	86	85
Food 'always' suitable for dietary needs	65		53			64	59	58	61	58	60	58
Staff 'completely' considered home situation when planning discharge	80	77	72	70	72	73	73	69	69	68	74	73
At discharge, felt well enough to leave hospital	95	91	89	92	91	90	90	87	88	86	94	92
Nurses 'always' knew enough about patient's care and treatment	83	78	73	65	61	72	67	66	69	66	77	75
Doctors 'always' knew enough about patient's medical history	77	60	68	69	58	67	70	63	65	64	74	71
At discharge, 'completely' adequate arrangements made for services needed	76	68	68	67	72	70	68	65	67	62	72	70
Told who to contact if worried about condition or treatment after discharge	85	87	85	91	87	85	83	82	82	82	87	86
'Definitely' involved in decisions about care and treatment	62	60	60	55	53	56	53	54	53	47	63	60
'Definitely' involved in decisions about discharge	66	68	63	73	54	61	64	59	61	51	67	64

or a mental health condition reveals a cumulative effect. Patients with multiple disabilities responded less positively than those with a single condition (Figure 3.1).

Result relative to patients without disability:

■ Significantly lower ■ Significantly higher ■ Not significantly different □ Data suppressed (<30 responses)

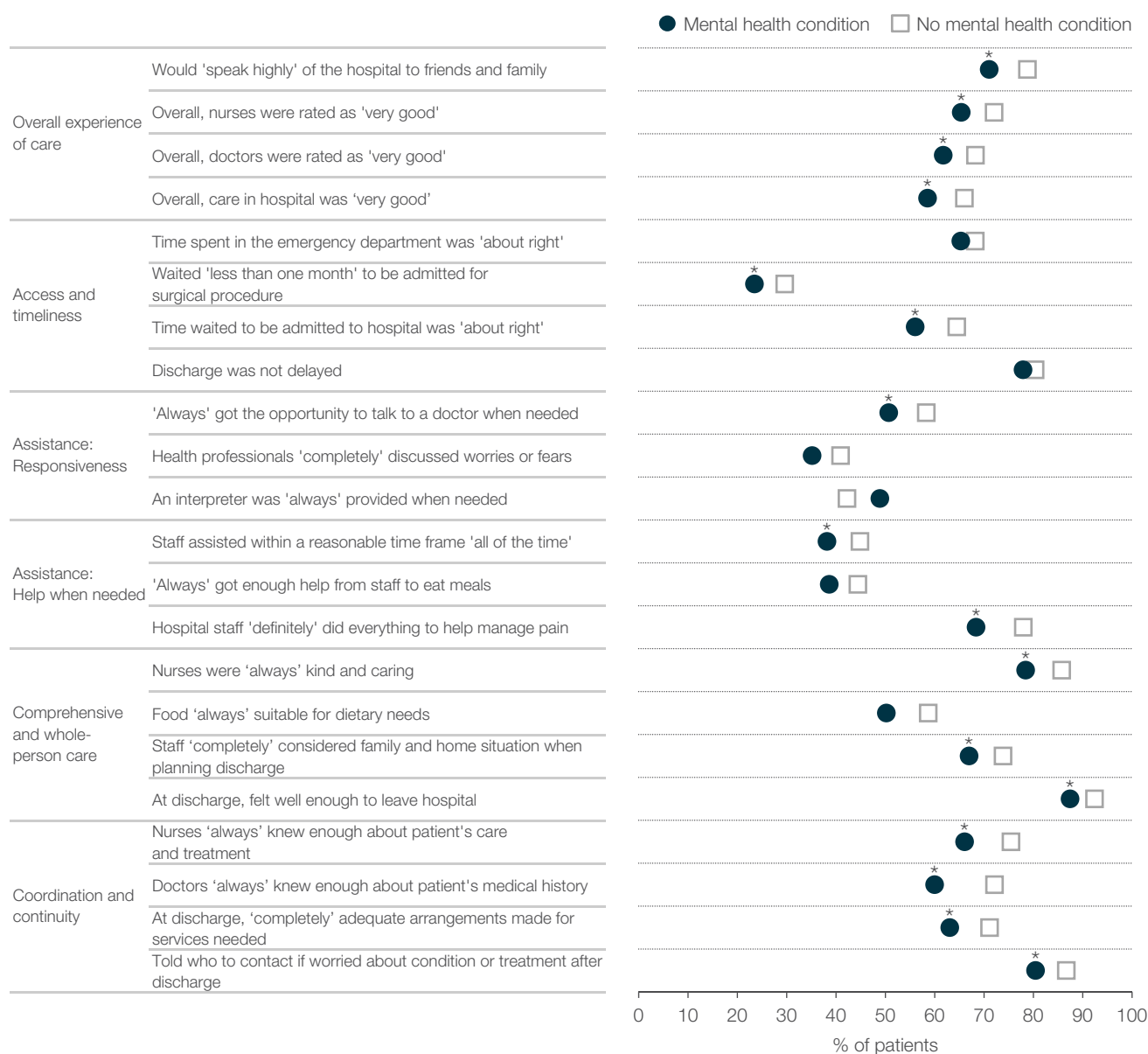
	Only condition					Condition plus other					Without disability	NSW overall
	Deafness	Blindness	Physical condition	Learning disability	Neurological	Deafness	Blindness	Physical condition	Learning disability	Neurological		
Given 'completely' enough information to manage care at home	81	82	72	81	68	72	73	67	66	63	74	73
Given 'right amount' of information about condition or treatment during stay	85	88	85	87	80	83	80	79	80	79	87	85
Family or someone close given 'right amount' of information about condition	83	83	77	79	79	79	77	74	72	73	82	80
While in hospital, received or saw information about patients' rights	40	40	39	37	28	39	40	40	37	32	38	39
'Completely' informed about medication side effects to watch for	51	63	52	56	47	49	56	44	59	40	54	52
Did not experience unfair treatment	96	91	94	80	94	93	88	91	85	86	96	95
'Always' treated with respect and dignity	93	82	86	76	79	87	81	81	83	81	88	87
'Always' given enough privacy when being examined or treated	89	81	84	81	76	88	88	86	82	84	88	87
'Always' given enough privacy when discussing condition or treatment	84	77	80	84	74	80	78	75	78	70	83	81
Staff seen on arrival were 'always' polite and courteous	96	97	93	88	97	95	92	91	85	91	93	93
Emergency department staff were 'always' polite and courteous	91	86	88	84	87	90	89	86	78	89	88	88
Nurses 'always' answered questions in an understandable way	81	79	78	74	72	74	68	73	65	70	82	79
Doctors 'always' answered questions in an understandable way	78	75	72	71	73	71	67	69	59	65	78	76
'Always' had confidence and trust in nurses	90	80	83	78	84	83	80	80	83	77	85	84
'Always' had confidence and trust in doctors	87	86	79	75	74	79	78	77	74	76	84	82
Wards or rooms were 'very clean'	73	69	69	63	60	66	65	63	66	60	69	68
Toilets and bathrooms were 'very clean'	69	57	62	57	54	60	61	55	61	53	60	60
Nurses 'always' checked ID band before giving treatments	92	84	91	89	84	89	89	89	86	88	91	91
Call button was 'always' placed within easy reach	89	83	86	75	87	84	83	82	83	75	86	85
'Always' saw nurses wash their hands or use clean gloves	62	68	60	65	54	63	61	58	59	53	58	59
'Always' saw doctors wash their hands or use clean gloves	48	54	48	60	42	48	51	44	51	40	49	49
Did not experience complication related to hospital care	87	85	83	77	81	79	77	79	78	76	88	85
Care and treatment received 'definitely' helped	81	77	74	80	67	74	72	70	71	65	81	78
Health problem 'much better' following hospital care	77	68	65	76	52	66	64	62	61	51	79	73
Number of times results more positive than NSW	7	0	0	0	1	1	0	0	0	0		
Number of times results less positive than NSW	0	1	11	4	14	16	19	36	20	33		

Results at a glance: Mental health

Experiences differed for patients with and without mental health conditions consistently across all aspects of care in the survey.[†] A summary of results for the 48 questions in the report show patients with

a self-reported mental health condition responded significantly less positively than those with no mental health condition for 40 of the 48 survey questions.

Figure 3.2 Results for all questions, percentage reporting the most positive response: Patients with and without a mental health condition, by aspect of care, NSW, 2015

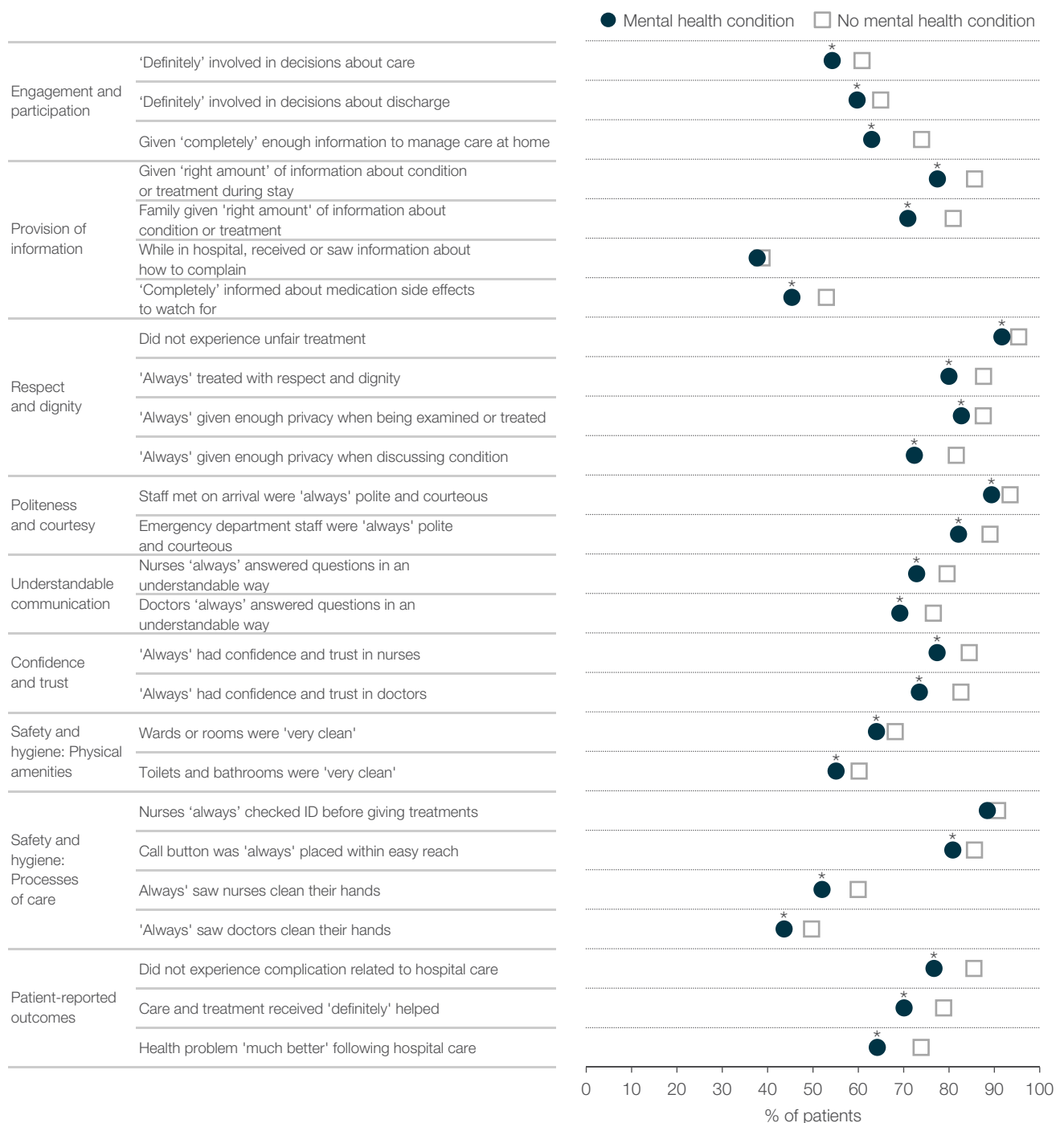


[†] The AAPS sampling frame excludes patients who were admitted to hospital for any psychological-related reason, therefore the sample is not representative of the overall patient population with a mental health condition.

* There was a significant difference in the percentage of patients with and without a mental health condition who selected the most positive response category.

The average percentage point difference was -7.0, and there were three responses for which the gaps were larger than 10 percentage points (doctors 'always' knew enough about patient's medical history;

given 'completely' enough information to manage care at home; family given 'right amount' of information about condition) (Figure 3.2).



* There was a significant difference in the percentage of patients with and without a mental health condition who selected the most positive response category.

Results at a glance: Longstanding illness

Results are shown separately here for patients who self-reported a longstanding illness (such as cancer or diabetes) compared with those who did not report any longstanding illness. Of the 48 questions,

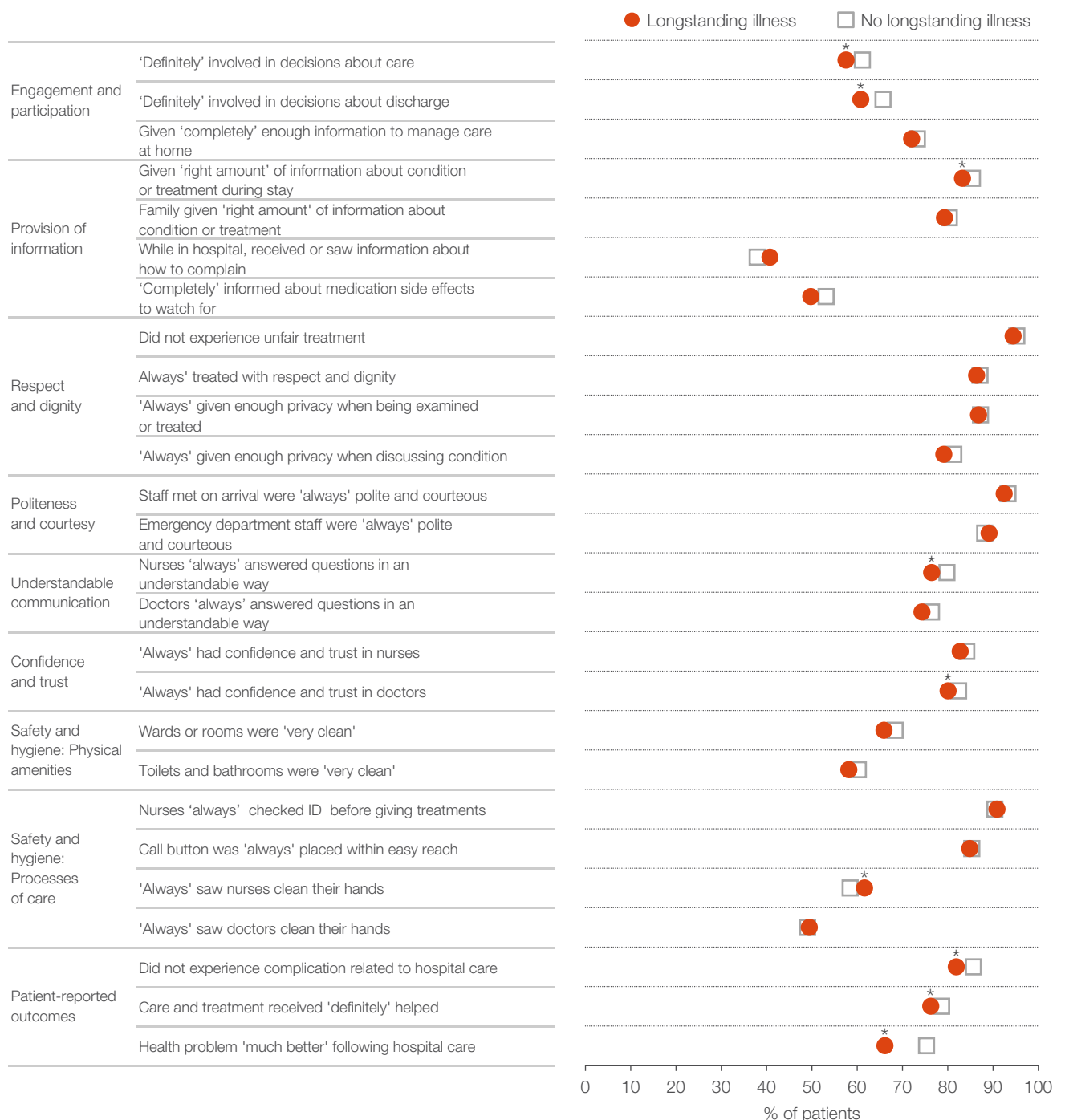
there were three questions to which the group with a longstanding illness responded more positively – those questions were regarding timeliness of care and safety and hygiene.

Figure 3.3 Results for all questions, percentage reporting the most positive response: Patients with and without a longstanding illness, by aspect of care, NSW, 2015



There were 13 questions for which patients with a longstanding illness had less positive experiences – addressing access, coordination, engagement, information and communication and patient

outcomes. The average difference between patients with and without a longstanding condition was -2.0 percentage points (Figure 3.3).



*There was a significant difference in the percentage of patients with and without disability who selected the most positive response category.

Appendices

Appendix 1

Local health district respondent counts and percentage with disability

Table A1 Number of respondents, by local health district, NSW, 2015

Local health district	Number of respondents with disability	Number of respondents without disability	Total
Central Coast	300	526	826
Far West	132	184	316
Hunter New England	1692	3458	5150
Illawarra Shoalhaven	563	992	1555
Mid North Coast	693	1124	1817
Murrumbidgee	566	1083	1649
Nepean Blue Mountains	351	733	1084
Northern NSW	941	1822	2763
Northern Sydney	536	1386	1922
South Eastern Sydney	483	1434	1917
South Western Sydney	523	1311	1834
Southern NSW	725	1607	2332
St Vincent's Health Network	89	227	316
Sydney	263	888	1151
Western NSW	805	1568	2373
Western Sydney	322	1064	1386
NSW	8984	19407	28391

Figure A2 Percentage of patients reporting disability, by LHD, NSW, 2015

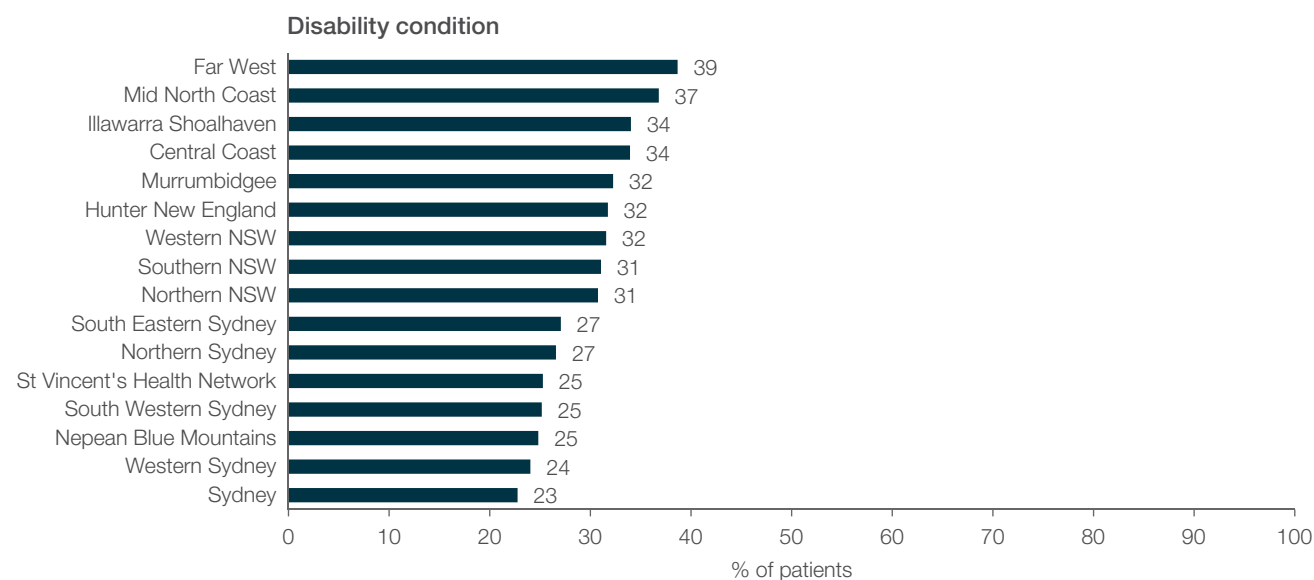
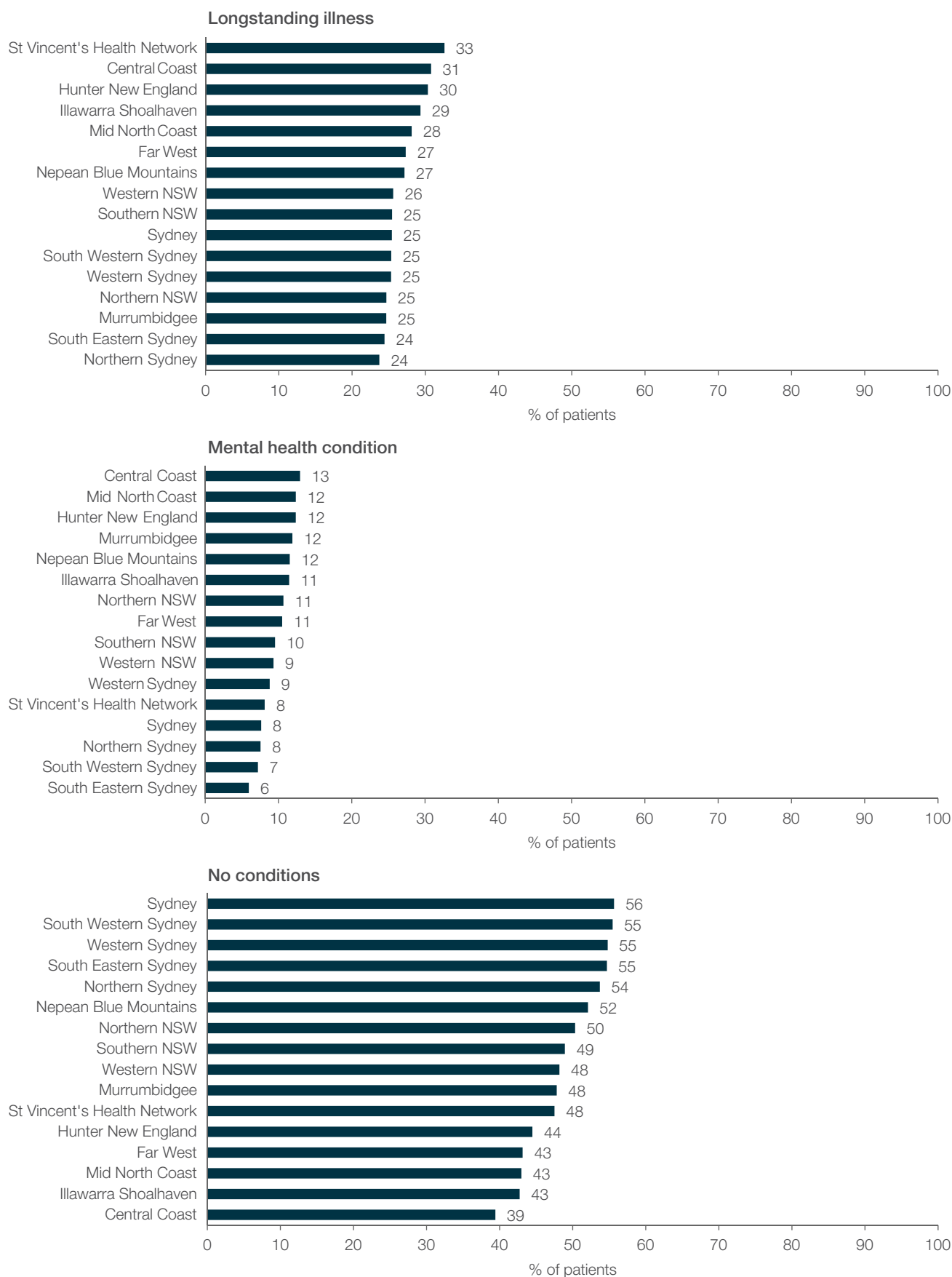


Figure A3 **Percentage of patients reporting longstanding illness, mental health condition, and no health conditions at all (disability, mental health or longstanding illness) by LHD, NSW, 2015**



Appendix 2

Hospitals in the survey

Table A4 Sampled hospitals, number of respondents by patients with and without disability and other patient-reported conditions, NSW, 2015

Local Health District	Hospital	Number of respondents		Patient-reported conditions (%)			
		Disability condition	No disability condition	Disability condition	Longstanding illness	Mental health condition	None reported
Central Coast LHD	Gosford	126	282	30	30	12	42
	Wyong	174	244	41	32	14	35
Far West LHD	Broken Hill Health Base	132	184	39	27	11	43
Hunter New England LHD	Armidale and New England	141	264	34	27	11	48
	Belmont	120	285	27	28	15	44
	Calvary Mater Newcastle	125	267	31	44	12	35
	Cessnock District	111	214	34	29	16	43
	Gunnedah District	71	158	30	24	8	51
	Inverell District	104	194	32	26	11	45
	John Hunter	114	247	31	30	14	45
	Kurri Kurri District	172	241	41	29	11	38
	Maitland	137	242	34	26	13	45
	Manning District	162	283	36	31	13	40
	Moree District	61	151	29	21	6	51
	Muswellbrook District	79	220	24	27	11	51
	Narrabri District	75	167	29	19	8	53
	Singleton District	86	246	23	20	12	57
	Tamworth District	134	279	32	30	8	48
Illawarra Shoalhaven LHD	Bulli District	20	46	27	18	5	60
	Milton and Ulladulla	108	167	38	30	12	38
	Shellharbour	154	260	37	29	13	41
	Shoalhaven District Memorial	154	286	34	33	11	41
	Wollongong	127	233	33	29	11	44
Mid North Coast LHD	Bellinger River District	70	93	40	29	11	35
	Coffs Harbour Base	152	248	36	29	13	44
	Kempsey	154	279	36	25	13	44
	Macksville District	165	255	39	26	11	42
	Port Macquarie Base	152	249	37	28	12	42
Murrumbidgee LHD	Deniliquin Health Service	126	192	39	29	11	43
	Griffith Base	96	211	32	27	10	47
	Tumut Health Service	113	162	36	27	15	42
	Wagga Wagga Base	126	269	32	23	12	49
	Young Health Service	105	249	30	26	10	48
Nepean Blue Mountains LHD	Blue Mountains District Anzac Memorial	141	242	35	29	10	44
	Lithgow Health Service	128	226	36	29	13	41
	Nepean	82	265	23	27	12	54
Northern NSW LHD	Ballina District	176	263	41	26	11	39
	Casino and District Memorial	111	231	31	25	9	50
	Grafton Base	149	276	35	25	13	44
	Lismore Base	113	275	28	26	10	53
	Maclean District	134	191	43	31	12	39
	Murwillumbah District	132	306	30	21	10	52
	The Tweed	126	280	30	23	11	51

Local Health District	Hospital	Number of respondents		Patient-reported conditions (%)			
		Disability condition	No disability condition	Disability condition	Longstanding illness	Mental health condition	None reported
Northern Sydney LHD	Hornsby Ku-ring-gai	115	301	27	26	7	52
	Manly District	104	277	25	20	7	60
	Mona Vale and District	113	280	26	20	6	59
	Royal North Shore	102	271	27	25	9	51
	Ryde	102	257	28	22	7	54
South Eastern Sydney LHD	Prince of Wales	94	284	24	23	5	56
	Royal Hospital for Women	34	348	7	10	5	81
	St George	111	251	30	27	6	52
	Sutherland	132	294	30	32	7	48
	Sydney/Sydney Eye	112	257	30	17	8	56
South Western Sydney LHD	Bankstown/Lidcombe	83	232	27	26	7	55
	Bowral and District	146	267	36	25	14	44
	Camden	64	60	49	45	10	19
	Campbelltown	80	274	22	24	6	58
	Fairfield	72	238	23	18	5	65
	Liverpool	78	240	25	28	8	53
Southern NSW LHD	Bateman's Bay District	136	261	35	26	9	44
	Bega District*	124	306	28	27	9	51
	Cooma Health Service	101	259	27	20	12	55
	Goulburn Base	146	240	37	27	9	44
	Moruya District	129	246	34	32	8	42
	Queanbeyan Health Service	89	295	22	18	10	60
St Vincent's Health Network	St Vincent's, Sydney	89	227	25	33	8	48
Sydney LHD	Canterbury	64	269	18	17	7	66
	Concord	106	249	29	30	6	48
	Royal Prince Alfred	93	370	20	25	9	57
Western NSW LHD	Bathurst Base	139	258	32	26	12	48
	Cowra District	109	210	33	25	12	48
	Dubbo Base	118	247	31	27	8	48
	Forbes District	98	183	32	21	12	52
	Mudgee District	108	226	32	30	11	45
	Parkes District	109	187	36	25	10	43
	Orange Health Service	124	257	31	24	8	49
Western Sydney LHD	Auburn	62	243	22	18	7	64
	Blacktown	79	237	24	29	11	52
	Mount Druitt	96	323	23	17	7	62
	Westmead	85	261	25	26	9	53

* South East Regional Hospital replaced Bega District Hospital in March 2016

Appendix 3

Socio-demographic profiles

The report explores variation in experiences between patients with and without disability across NSW, LHDs and hospitals. The populations served by LHDs differ in terms of social, economic, health and ethnic characteristics. This variation extends to differences within the populations they serve.

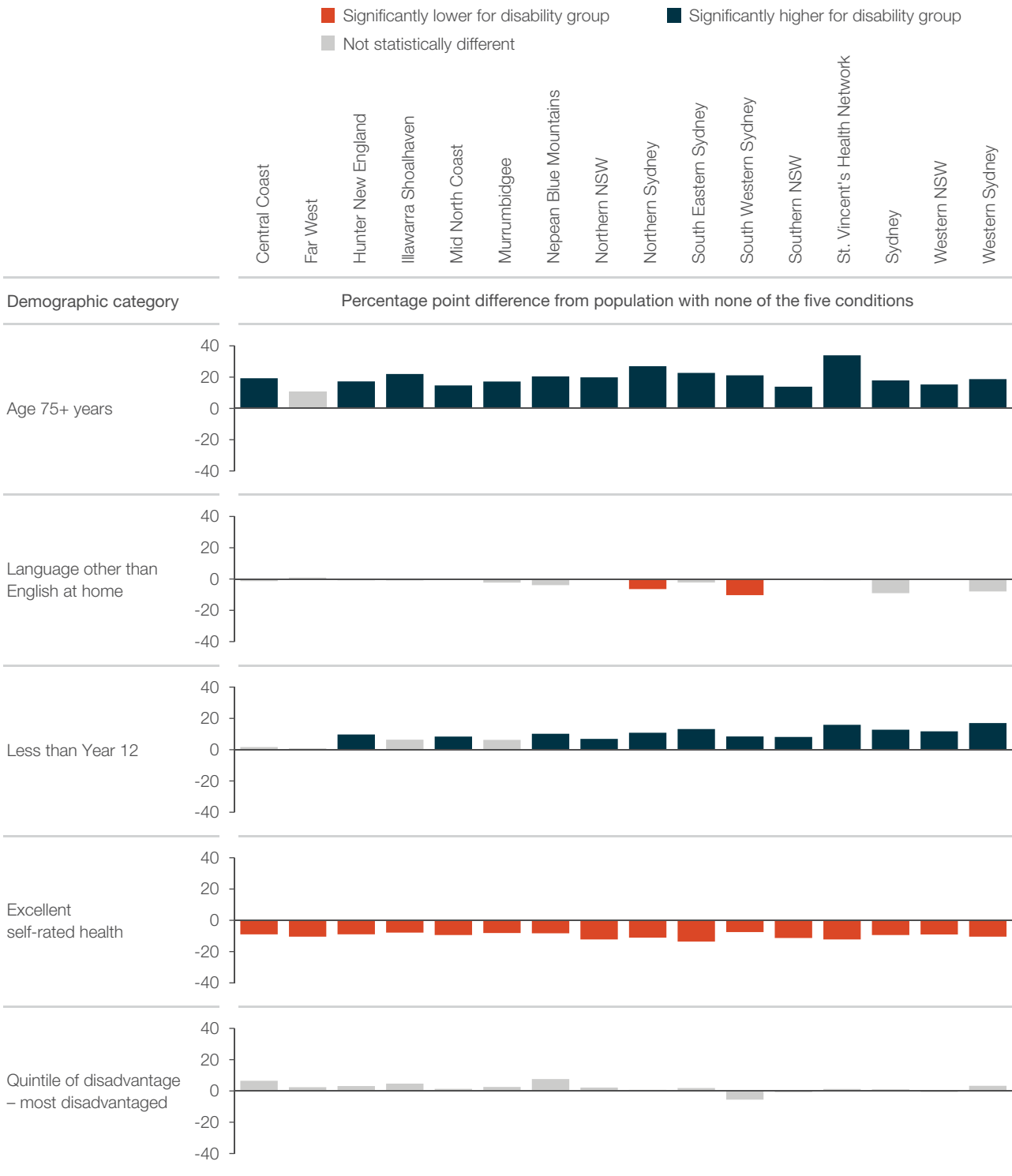
A review of the differences in the profiles between patients with and without disability across LHDs follows.

Table A5 shows the characteristics at the NSW level where patients with disability are more likely to be over 75+ years, have less than high school education and/or have poor self-rated health. Across LHDs, these patterns are quite consistent (Figure A6).

Table A5 Socio-demographic characteristics of patients, by patients with and without disability, NSW, 2015

		Patients with disability	Patients without disability	Total
Age	18–34	3	11	-8
	35–54	12	24	-12
	55–74	40	40	0
	75+	44	25	19
Highest level of education completed	Has university degree/s	10	19	-9
	Less than Year 12	49	38	11
In general, how would you rate your health?	Excellent	3	13	-10
	Poor	12	3	9
Language mainly spoken at home	English	93	88	5
	Other language	7	12	-5
Quintile of disadvantage	1: Most disadvantaged	23	20	3
	5: Least disadvantaged	9	12	-3

Figure A6 Gap analysis of respondents' socio-demographic characteristics, patients with and without disability by LHD, NSW, 2015



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Acknowledgements

The Bureau of Health Information (BHI) is the main source of information for the people of NSW about the performance of their public healthcare system. A board-governed organisation, BHI is led by Chairperson Professor Carol Pollock and Acting Chief Executive Dr Kim Sutherland.

We thank our expert advisors, colleagues at the Ministry of Health, Pillar organisations and reviewers who contributed to the report.

We also thank the Disability Inclusion Action Plan (DIAP) steering committee for their advice and guidance. A multi-agency committee brought together by the NSW Ministry of Health, it is comprised of experts in the health field and representatives of relevant consumer groups such as Disability Council NSW and Carers NSW.

We acknowledge the contribution of TaggedPDF in making the accessible version of this report.

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