

Adult Admitted Patient Survey 2026

With modules on shared decision-making and
Aboriginal patient experience

Development Report

March 2026

BUREAU OF HEALTH INFORMATION

1 Reserve Road

St Leonards NSW 2065

Australia

Telephone: +61 2 9464 4444

bhi.nsw.gov.au

© Copyright Bureau of Health Information 2026

This work is copyrighted. It may be reproduced in whole or in part for study or training purposes subject to the inclusion of an acknowledgement of the source. It may not be reproduced for commercial usage or sale. Reproduction for purposes other than those indicated above requires written permission from the Bureau of Health Information.

State Health Publication Number: (BHI) 260186

Suggested citation:

Bureau of Health Information. Development Report – Adult Admitted Patient Survey 2026.
Sydney (NSW): BHI; 2026.

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

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

Published March 2026

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

Background

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

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

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

Review of the Adult Admitted Patient Survey

As part of the BHI *Strategic Plan 2023–2026*, BHI regularly reviews and adapts the NSW Patient Survey Program to ensure the information remains relevant and useful. The aim is to: maintain focus on aspects of care that matter most to patients; reflect the complexity of patients' healthcare journeys; and align with health system priorities. The review is also an opportunity to streamline questionnaires and improve accessibility.

During 2023 and early 2024, BHI developed a Minimum Question Set for surveys seeking patients' reflections on their experiences of care. The Minimum Question Set is applicable across different patient cohorts and care settings and has been applied across NSW Patient Survey Program questionnaires. The Minimum Question Set forms part of the 'core content' described in this report. Supplementary 'modules' are targeted sets of questions that are added to a questionnaire to collect data for a patient group or service. These one-off or periodic modules are designed to meet the health system's particular requirements for additional information.

For AAPS 2026, the wording of one question was amended to align with the Minimum Question Set. The change is outlined in the [Overview of changes](#) section.

The AAPS 2026 questionnaire is available on the [BHI website](#).

Addition of shared decision-making module

BHI will include a new 12-question module in AAPS, asking patients about their experiences of making decisions about their care and treatment in hospital, including whether they felt informed, supported, and involved in decisions about their care and treatment.

The module provides a unique opportunity to gain deeper insights into experiences of shared decision-making from the patient's perspective, complementing the core questionnaire and providing actionable insights that inform opportunities for improvement.

The Agency for Clinical Innovation (ACI) and the University of Sydney jointly developed the initial question set and then collaborated with BHI to refine it for inclusion in the survey. The question set builds on an existing, validated, shared decision-making measure that has been adapted to better reflect cultural and relational aspects of decision-making in healthcare. These adaptations were informed by Aboriginal and Torres Strait Islander perspectives to improve shared decision-making for all patients.

The module is online only for patients sampled between January and June 2026, or until sufficient responses are collected to support analysis and reporting.

The questions included in this module are outlined in [the Module – shared decision-making section](#).

Further information about shared decision-making is available on the [ACI website](#).

Addition of an Aboriginal patient module

As part of this survey, Aboriginal patients admitted to NSW public hospitals in 2026 are being invited to provide feedback about their experiences of care. These patients are provided with the core survey questions and an additional 11-question module containing new questions identified to be of high relevance to Aboriginal patients, the Aboriginal community and other relevant stakeholders. These additional questions are a subset of the Aboriginal Patient Experience Question Set, developed in collaboration with Aboriginal people, the NSW Ministry of Health's Centre for Aboriginal Health (CAH), the Aboriginal Patient Experience Survey Program Advisory Committee and other key stakeholders from across the NSW health system.

The Aboriginal Patient Experience Survey Program 2019–22 is a collaboration between BHI and CAH, aimed at delivering detailed, system-wide information about Aboriginal patients' experiences and outcomes of hospital care in NSW.

Further information about the Aboriginal Patient Experience Question Set, including the development report, is available on the [BHI website](#).

Overview of changes

Core content changes:

Amended question and response options:

- Q44

Module changes:

The content of the new module is outlined in separate tables below:

[Shared decision-making](#).

No changes were made to the Aboriginal patient module.

Details of changes – core content

Question # 2025	Question # 2026	Updated question (as it appears in 2026 questionnaire)	Change from 2025	Rationale
Q44	Q44	<p>Were the health professionals you saw in your community (e.g. your GP) up-to-date about the care you received in hospital?</p> <p>Yes, definitely</p> <p>Yes, to some extent</p> <p>No</p> <p>Don't know/can't remember</p> <p>Not applicable</p>	<p>Amended question wording:</p> <p>Question wording changed from 'In the 30 days after your discharge from hospital, were the health professionals you saw in your community (e.g. your GP) up-to-date about the care you received in hospital?'</p> <p>Amended response option:</p> <p>Added 'Don't know/can't remember' to the response options.</p>	<p>This question was amended to align with other BHI patient survey questionnaires.</p> <p>This response option was amended to align with the standard BHI response scales.</p>

New module – shared decision-making

The shared decision-making module is included in the AAPS 2026 online questionnaire to gain insights into patients' experiences of making decisions about their care and treatment with health professionals in hospital.

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

Question (as it appears in 2026 online questionnaire)

For the statements in this section, please think about what happened when decisions were made with the health professionals about your care and treatment during your hospital stay.

I felt safe and ready to talk to the health professionals about my health.

Yes, definitely

Yes, to some extent

No

Don't know/can't remember

The health professionals supported me to make decisions about my health (e.g. my care and treatment).

Yes, definitely

Yes, to some extent

No

Don't know/can't remember

Not applicable

I could involve who I wanted in decisions about my health (e.g. a family member).

Yes, definitely

Yes, to some extent

No

Don't know/can't remember

Not applicable

Question (as it appears in 2026 online questionnaire)

I was able to share with the health professionals what was important to me about my health (e.g. my care and treatment).

Yes, definitely

Yes, to some extent

No

Don't know/can't remember

Not applicable

I understood there were options to treat my health problem.

Yes, definitely

Yes, to some extent

No

Don't know/can't remember

Not applicable

I talked about the possible benefits and harms of the options with the health professionals.

Yes, definitely

Yes, to some extent

No

Don't know/can't remember

Not applicable

I talked about my goals and concerns about the options with the health professionals.

Yes, definitely

Yes, to some extent

No

Don't know/can't remember

Not applicable

Question (as it appears in 2026 online questionnaire)

I had enough time to understand the care and treatment options.

Yes, definitely

Yes, to some extent

No

Don't know/can't remember

Not applicable

I felt able to take a break or not decide on an option right away.

Yes, definitely

Yes, to some extent

No

Don't know/can't remember

Not applicable

I felt able to share my preferred option with the health professionals.

Yes, definitely

Yes, to some extent

No

Don't know/can't remember

Not applicable

I felt able to choose the best option for me.

Yes, definitely

Yes, to some extent

No

Don't know/can't remember

Not applicable

Question (as it appears in 2026 online questionnaire)

I felt we (the health professionals and I) chose the best care and treatment option for me.

Yes, definitely

Yes, to some extent

No

Don't know/can't remember

Not applicable
