

Dear 

DECISION ON YOUR ACCESS APPLICATION

I refer to your application under section 30 of the *Freedom of Information Act 2016* (FOI Act), received by Canberra Health Services (CHS) on **Thursday 29 February 2024**.

This application requested access to:

'The most recent iteration of the bi-annual Patient Experience Report submitted to the Our Care Committee.'

I am an Information Officer appointed by the Chief Executive Officer of Canberra Health Services (CHS) under section 18 of the FOI Act to deal with access applications made under Part 5 of the Act. CHS was required to provide a decision on your access application by **Tuesday 16 April 2024**.

I have identified one document holding the information within scope of your access application.

Decisions on access

I have decided to grant full access to one document. The documents released to you are provided as Attachment A to this letter.

In reaching my access decision, I have taken the following into account:

- The FOI Act;
- The contents of the documents that fall within the scope of your request;
- The *Human Rights Act 2004*; and
- The *Health Records (Privacy and Access) Act 1997*.

Redactions have been made to information comprised of medical and health records of individuals. Section 12 of the FOI Act specifies that the Act does not apply to information in a health record as defined by the *Health Records (Privacy and Access) Act 1997* (the HR Act).

The HR Act defines a health record as any record containing personal health information. The HR Act defines personal health information as 'any personal information (a) relating to the health, an illness or a disability of the consumer; or (b) collected by a health service provider in relation to the health, an illness, or a disability of the consumer.' A 'consumer' is defined broadly and includes any individual who uses, or has used, a health service.

Charges

Processing charges are not applicable to this request.

Disclosure Log

Under section 28 of the FOI Act, CHS maintains an online record of access applications called a disclosure log. The scope of your access application, my decision and documents released to you will be published in the disclosure log not less than three days but not more than 10 days after the date of this decision. Your personal contact details will not be published.

<https://www.health.act.gov.au/about-our-health-system/freedom-information/disclosure-log>.

Ombudsman review

My decision on your access request is a reviewable decision as identified in Schedule 3 of the FOI Act. You have the right to seek Ombudsman review of this outcome under section 73 of the Act within 20 working days from the day that my decision is published in ACT Health's disclosure log, or a longer period allowed by the Ombudsman.

If you wish to request a review of my decision you may write to the Ombudsman at:

The ACT Ombudsman

GPO Box 442

CANBERRA ACT 2601

Via email: ACTFOI@ombudsman.gov.au

Website: ombudsman.act.gov.au

ACT Civil and Administrative Tribunal (ACAT) review

Under section 84 of the Act, if a decision is made under section 82(1) on an Ombudsman review, you may apply to the ACAT for review of the Ombudsman decision. Further information may be obtained from the ACAT at:

ACT Civil and Administrative Tribunal

Allara House

15 Constitution Avenue

GPO Box 370

Canberra City ACT 2601

Telephone: (02) 6207 1740

<http://www.acat.act.gov.au/>

Further assistance

Should you have any queries in relation to your request, please do not hesitate to contact the FOI Coordinator on (02) 5124 9831 or email HealthFOI@act.gov.au.

Yours sincerely,



Janet Zagari

Deputy Chief Executive Officer

Canberra Health Services

12 April 2024



ACT
Government

**Canberra Health
Services**

Patient Experience Report

August 2023



Purpose:

This report is prepared bi-annually for the purposes of monitoring experiences of patients/clients/consumers across Canberra Health Services (CHS). This report contains data exported from several quality and safety governance systems and includes information relating to the following:

- Consumer Feedback and Engagement
- Open Disclosure
- Consumer Feedback Management - Staff Survey results
- Patient Experience Survey Program
- Working with Interpreters
- Policy and Procedure updates
- Health Information Sheets
- Vision Impaired Kits
- Education available for staff.

This report has been written by the Patient Experience team, Quality, Safety, Innovation, and Improvement (QSII) with information and data correct as of 7 August 2023.

For further information please write to CHS.QSII@act.gov.au

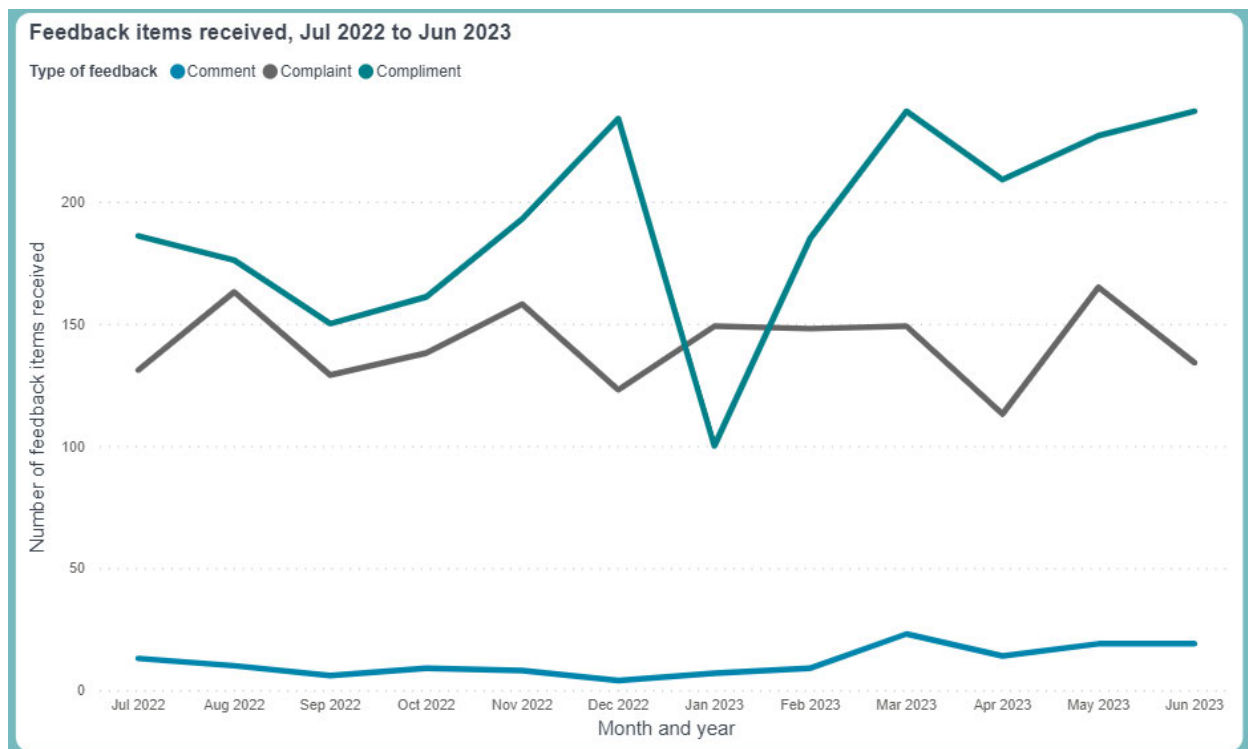
Stepping into their shoes:

Section 12 - Health Records

*They received excellent care across all the areas where they stayed. All staff were **very attentive**, the nurses and the doctors made a **great effort** to keep them **informed, comforted, supported and well cared for**. We were **very impressed** with the service and care they received. Doctor (name disclosed) who has been **very supportive, professional** and kept my family **informed** of their treatment. Keep it up- you are doing a great job.*

Consumer Feedback and Engagement

Number of Compliments and Complaints 1 July 2022 to 30 June 2023



*Excludes feedback received via ACT Health Ministers or the Human Rights Commission and current inpatients.

During the period 1 July 2022 to 30 June 2023 there were a total of 4136 pieces of feedback (Priority 3) received by the Consumer Feedback and Engagement Team (CFET), averaging approximately 80 pieces of feedback received each week. 55% of feedback received were compliments.

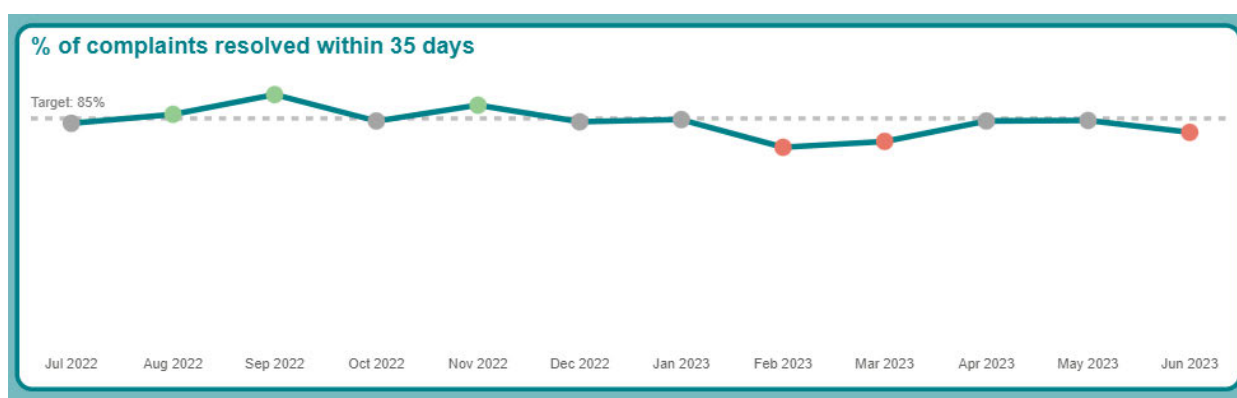
The top 5 modes of how feedback was received (excluding comments books in BreastScreen) is as follows:

- Online form (1181)
- Feedback form (740)
- Via email (592)
- Via phone call to the feedback team (444)
- Card or gift (176)

For this period, the Divisions that received the most compliments were CAS (1099, including comments book compliments from BreastScreen), Women, Youth and Children (312). Medicine (288) and The Divisions that received the most complaints were Medicine (377), CAS (291) and Surgery (265). Open cases (complaints) and compliments are sent to Divisions in the first week of each calendar month, and upon Divisional request.

Complaints resolved within 35-days - 1 July 2022 to 30 June 2023

Performance against this key performance indicator (KPI) can only be calculated 35 days after the end of the month. Results are provided in the chart below (excluding feedback received via ACT Government Ministers, HRC complaints – Priority 1- and inpatient feedback -Priority 2).



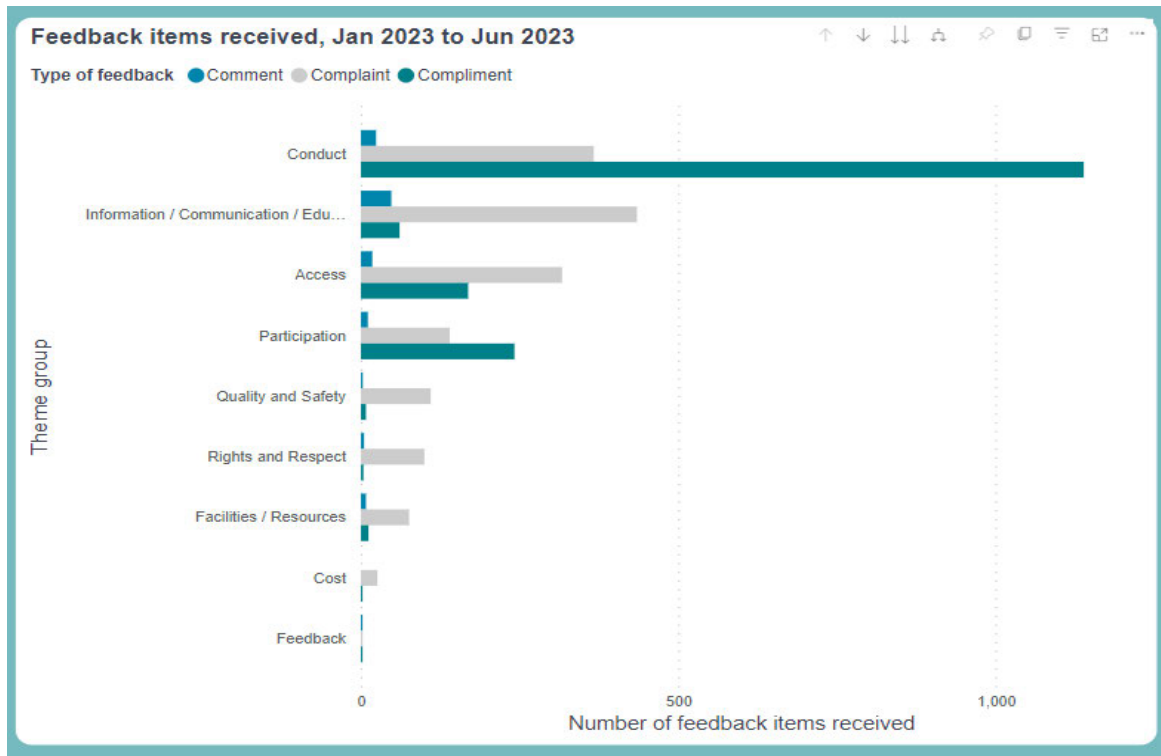
Source: Our Care Dashboard. Exported 7 August 2023

From July 2022, the percentage of response to complaints within 35 calendar days (Priority 3) was at or above target, with the average closure KPI result of 84% (Target is 85%). The September 2022 result was 94% which is the highest result recorded.

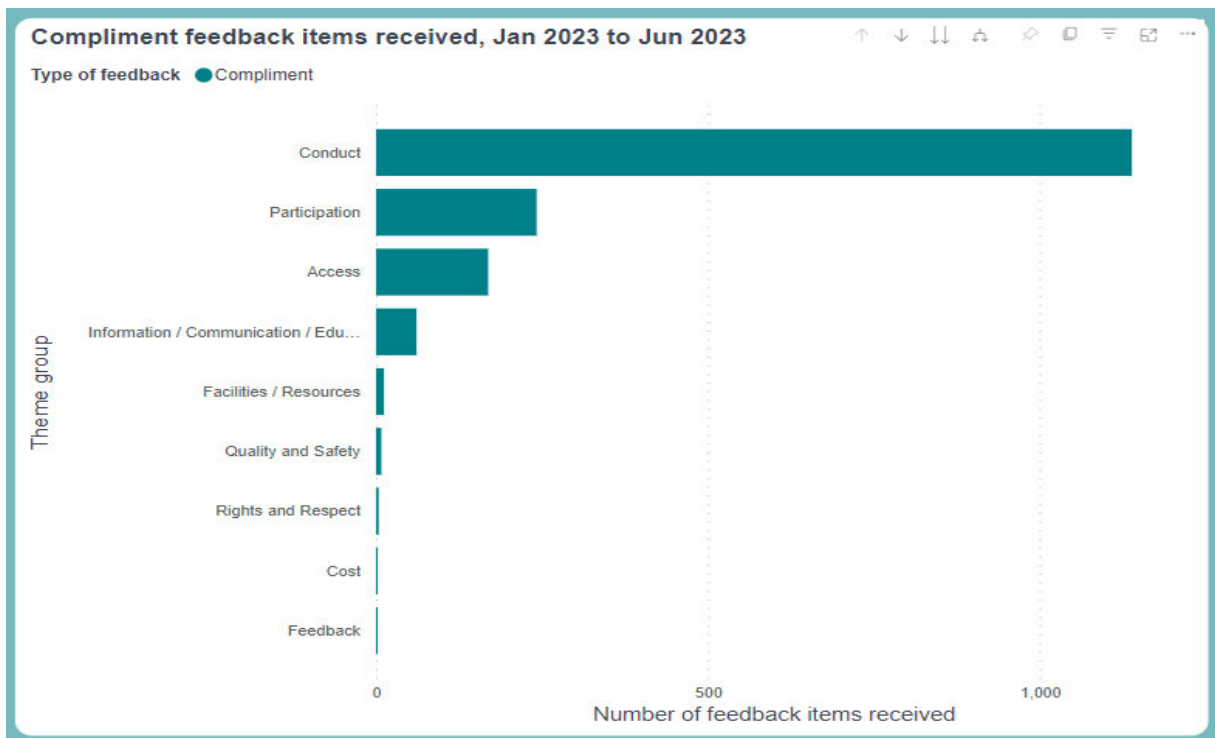
Since September 2021, CFET in conjunction with their manager have conducted a fortnightly review of all open cases and have worked closely with Divisional offices to respond to feedback in a timely way. This may be attributed to the positive increase in exceeding the target of 85%.

Consumer Feedback Themes – 1 January to 30 June 2023

Please note that multiple themes can be applied to each feedback piece. This data excludes feedback received via Ministerial and HRC complaints processes.

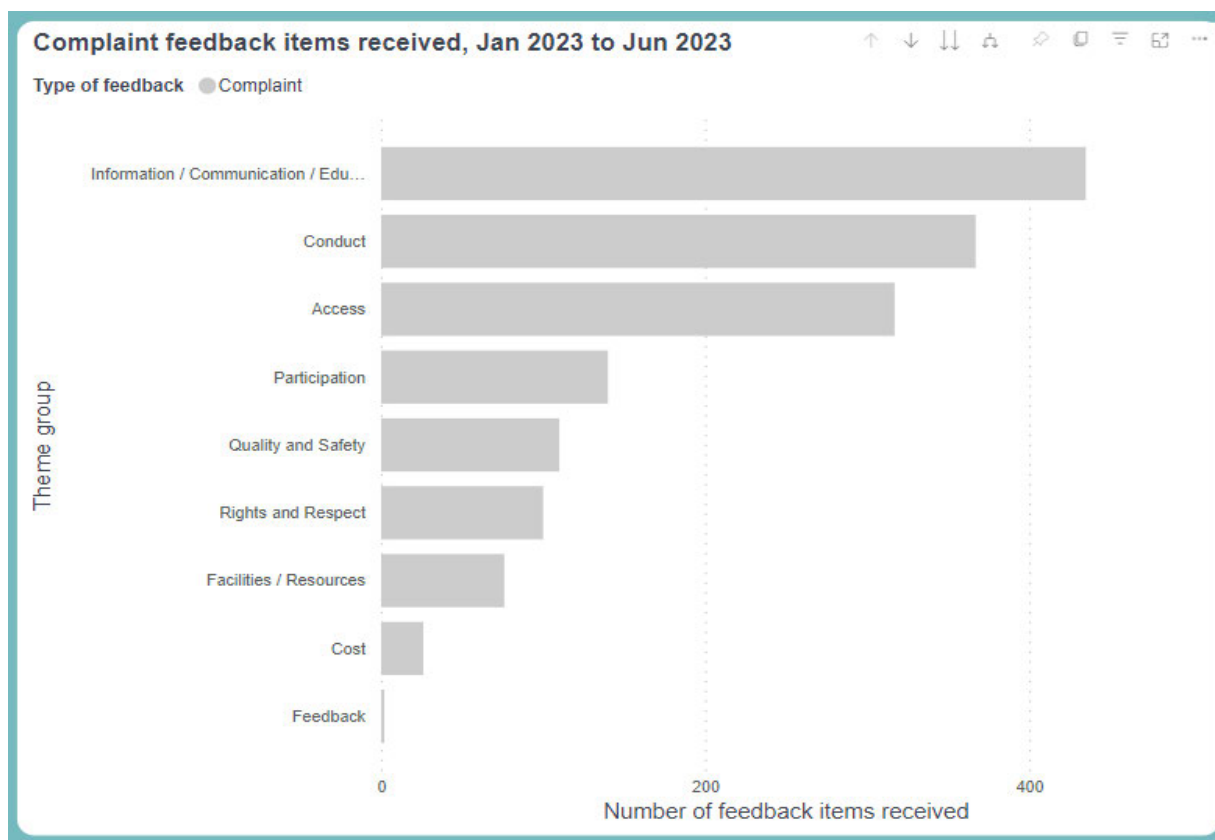


Compliments:



The main feedback themes from compliments received during this period was the conduct of staff, followed by participation (consultation; coordination of care; and discharge Planning) and access (treatment availability and timeliness).

Complaints:



The top three feedback themes for complaints received were in relation to Information/Communication/Education, Conduct (professional care, behaviours) of staff and Access.

Open Disclosure Update

QSII have conducted a review of the Open Disclosure Procedure. This Procedure aligns to the Australian Commission for Safety and Quality Open Disclosure Framework. The procedure has undergone extensive consultation with staff and consumer organisations, with updates made. The revised procedure will be tabled at the Policy Committee in August. To support the open disclosure process in CHS, the following is available to staff:

- **Education:** An e-learning is available to all staff and will be updated once the revised Procedure has been endorsed.
- **Face to face education:** A session has been scheduled in September 2023 for senior staff nominated by their divisions who are involved in and lead open disclosure conversations.
- **Recording of Open Disclosure:** QSII have requested that a template be developed and implemented in the DHR for staff to record open disclosure conversations and to be able to locate and monitor the quality of the documentation. This is in line with a Victorian Health LHD with an EMR.
- **Consumer Handout:** The existing handout will also be updated upon endorsement of the revised Procedure.

Consumer Feedback Management – Staff Survey

In April 2023 QSII asked staff about how supported they are with managing Consumer Feedback, through a staff survey. This survey was published on the HealthHub and open for two weeks. There was a total of 92 responses received from across the organisation.

Results including main themes of responses included:

- 47 respondents rated their overall experience with the Consumer Feedback and Engagement team as 'Excellent' or 'Good'.
- 53 respondents indicated that they had not sought guidance or support from the team to manage or respond to feedback.
- Processes for communicating urgent response.
- Requests for education.
- Support for the Consumer Feedback and Engagement team to provide general advice where possible to resolve feedback in a timely manner.
- Queries in relation to reporting and how to contact the Consumer Feedback and Engagement team.
- Some staff indicated that they unaware of who the team are or what they do.
- A number of respondents requested education about de-escalation and managing difficult conversations. QSII recommend staff to contact the Work Health Safety team for advice on managing occupational violence in the workplace.

Information for staff:

- In-services are available upon request by emailing healthfeedback@act.gov.au and available through HRIMS.
- A dedicated information page on Consumer Feedback management will be developed for the HealthHub.
- A4 Posters are available with a QR code and are available for download from the HealthHub. For a copy of the poster and for additional forms for your area please email healthfeedback@act.gov.au

The Consumer Feedback and Engagement Team can visit your area to gain feedback from patients. For requests, please call 5124 5932 during business hours or email healthfeedback@act.gov.au

Consumer Feedback Management- Policy and Procedure

The policy and procedure have been reviewed with some changes made from results of the staff survey. Staff consultation has closed through the Policy governance process with the documents provided to the three peak ACT consumer and carer organisations for their feedback. Consumer and carer organisation consultation feedback closes in September 2023.

Working with Interpreters

QSII receives Translation and Interpreter Services (TIS) data on a quarterly basis from the external provider engaged by CHS to provide interpreter services to consumers. Staff should be encouraged to book interpreters when consumers request an interpreter or speak in broken English.

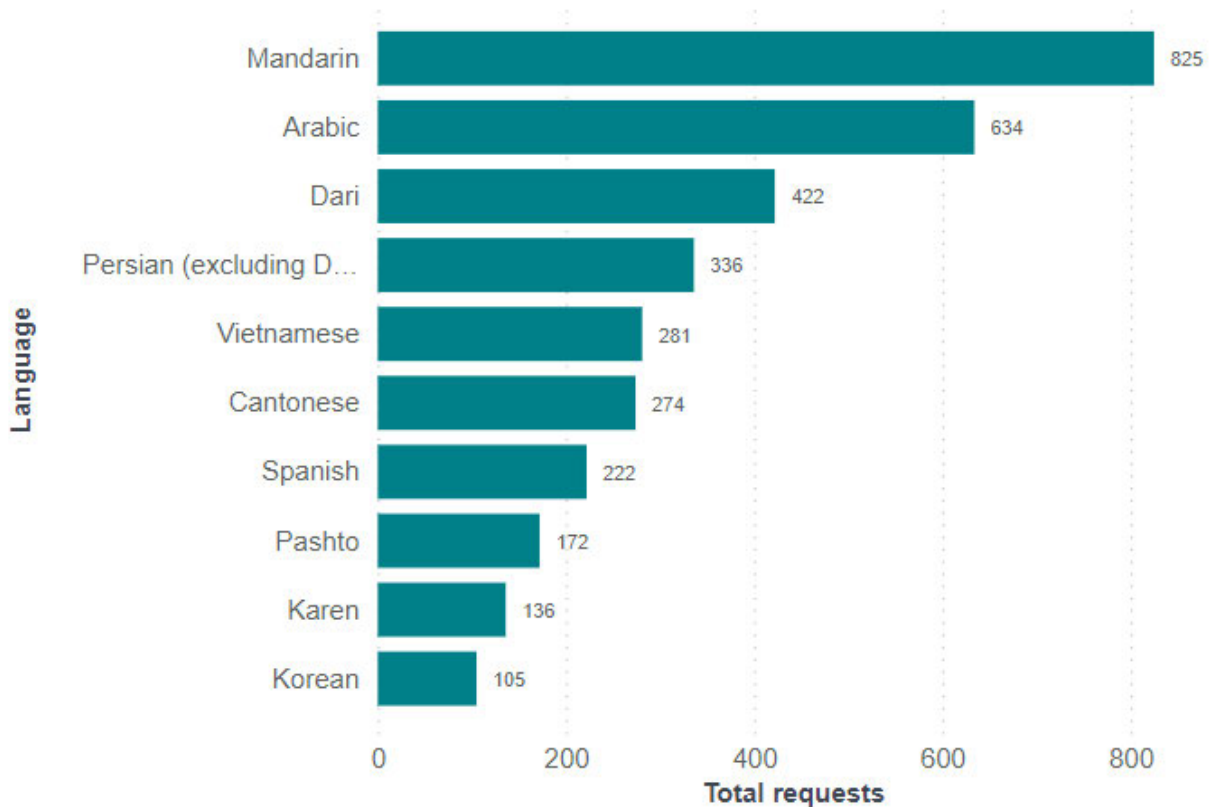
The Office of the Chief Finance Officer (CFO), QSII and the Office of Allied Health (operational Division responsible for governance of interpreters) also receive this data from the external provider.

Top Languages requested

During the period 1 January to 30 June 2023 there were 4534 requests for an interpreter across CHS, in 64 languages. These are similar results from the second half of 2022. The top three languages requested were:

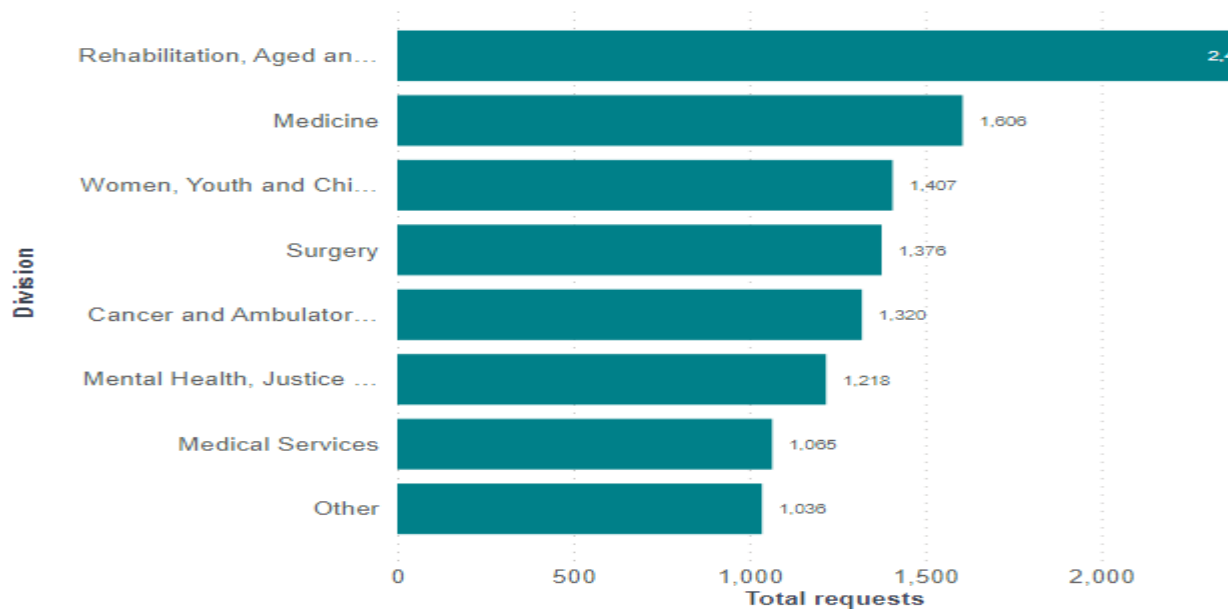
- Mandarin (825 requests)
- Arabic (634 requests)
- Dari (422 requests)

Total TIS requests (met and unmet), by top 10 requested languages, 2022–23



Total Requests by Division

Total TIS requests (met and unmet), by Division, 2022–23



The top three requesting Divisions for this period were:

- Rehabilitation, Aged and Community Services
- Medicine
- Women, Youth and Children.

These divisions continue to be the top requesting divisions.

During the period 1 January to 30 June 2023 22.0% were cancelled or unmet. This result equating to a total cost of \$19 856 to CHS (less than for the period 1 July to 31 December 2022). QSII recommends that bookings are cancelled when not required. Staff need to be reminded to cancel interpreter bookings when not required, for example, in the instance clinic appointments are cancelled or rescheduled.

Cancellations, by reason for cancellation, 2022–23

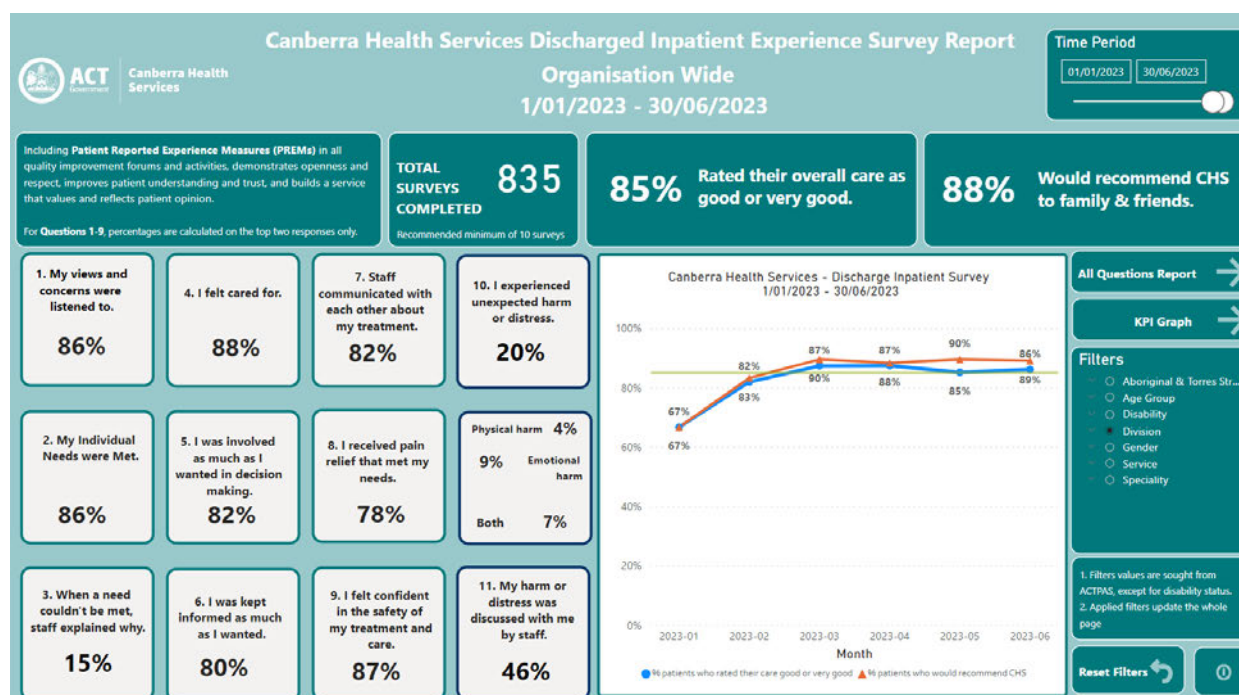
Reason cancelled	Number of cancellations	Cost	% of cancellation costs
Client failed to advise service not required	138	\$19,856	55.3%
Cancelled by Client (Insufficient Notice)	81	\$14,864	41.4%
NES could not be contacted	11	\$439	1.2%
Wait time over 10 min / IVR advised over 10 minute wait	11	\$328	0.9%
Call to Agency was not answered (Client code established)	7	\$203	0.6%
Agency disconnected	2	\$67	0.2%
Incorrect interpreter allocated (Agency Error)	4	\$67	0.2%
Message left on voicemail	2	\$58	0.2%
NES disconnected	1	\$29	0.1%
Total	257	\$35,910	100.0%

Patient Experience Survey Program

Progress update:

1. Patient Experience Survey Guideline: This Guideline has been developed and has been endorsed by the CHS Policy Committee following staff and consumer consultation. The Guideline outlines the process to develop survey and review results for improvement. The next steps are to develop staff education for survey and create an information page on the HealthHub.
2. Strategic Surveys: The QSII team are working with DSD and Business Intelligence data analysts to refine DHR patient demographic exports to recommence the CHS Outpatient, YES and Paediatric Surveys.
3. Patient Experience Survey Dashboard: Once the remaining strategic surveys have been implemented, results will be made available on this new dashboard, available to all staff. QSII will provide additional analysis of results of all surveys once reporting has recommenced.

Discharged Inpatient Experience Survey- 1 January to 30 June 2023



*Survey invitations placed on hold 21 November 2022 with changes to demographic report changes from ACTPAS to DHR.

For the period 1 January to 30 June 2023 there were 835 respondents to the survey. Approximately 60% of recently discharged inpatients are invited to complete this survey, with a response rate of 22%.

Prior to the implementation of the DHR ACTPAS was used as the source of patient demographic data. QSII re-commenced sending this survey to consumers in February 2023 utilising the DHR as the source for patient demographics.

Please note: Survey invitations were placed on hold 21 November 2022, pending development of patient demographic reports in DHR. The decreased results against the two strategic indicators are due to very low sample size responses and should not be considered for improvement.

KEY PERFORMANCE INDICATORS:

Two questions in the Discharged Inpatient Experience Survey are reported as CHS accountability indicators - 'Overall, how would you rate the care you received in hospital?' (Good or Very Good) and 'Would you recommend us to your family and friends? (Yes or No). The CHS target for both indicators is 85%. Please note that not all respondents to the survey answered all questions. These indicators remain above target of 85%.

88% (n= 649) told us they would recommend us to their family and friends.

85% (n= 704) told us their overall care was good or very good.

What we heard from consumers in survey:

"Everyone involved in my care both in hospital and (unit) made me feel safe and looked after. The regular visits and frank communication from my surgeon meant a lot to me. Vegan food options were really good".

"From the time I arrived at (unit) the attention I was given was second to none. The nurse who looked after me in (unit) were fantastic and I felt that they cared about me. The nurses should be applauded for their attention to my situation. Thanks to them all"

"The overall patient experience was fantastic. I am so grateful for having my situation heard, the provision of advice so that I could make an informed decision, the care and follow up. It was a scary situation, and I'm so grateful for the experience and the help that I received".

"Both the efficiency, helpfulness and friendliness of the nursing staff have improved significantly since my last visit and the quality of the food has improved by 1000%. Well done TCH".

Top tips:

- Actively involving consumers in handover/transfer of care discussions and ward rounds.
- Asking consumers or their carers whether they have any questions at regular intervals throughout admission or clinic appointments.
- Asking "What is important to you today?" in all inpatient wards and incorporating this into clinic and outpatient appointments.
- Checking in with consumers about whether they understand the verbal or written information provided and the plan for care.

Vision Impaired Persons (VIP Kits)

Earlier this year QSII was approached by the Eyes for Life team to launch VIP kits. Developed by Eyes for Life and IMB, the VIP hospital kits are a resource to help care for patients who are blind or have low vision, as well as being a resource for the patients, their carers and their loved ones when they come to hospital.

The kit is designed to cover all aspects of the hospital admission including pre-admission, the stay in hospital and follow-up ongoing support. The checklists, bedside signage and sighted guide information sheets can significantly improve the lives of patients who are vision impaired.

The VIP kit includes:

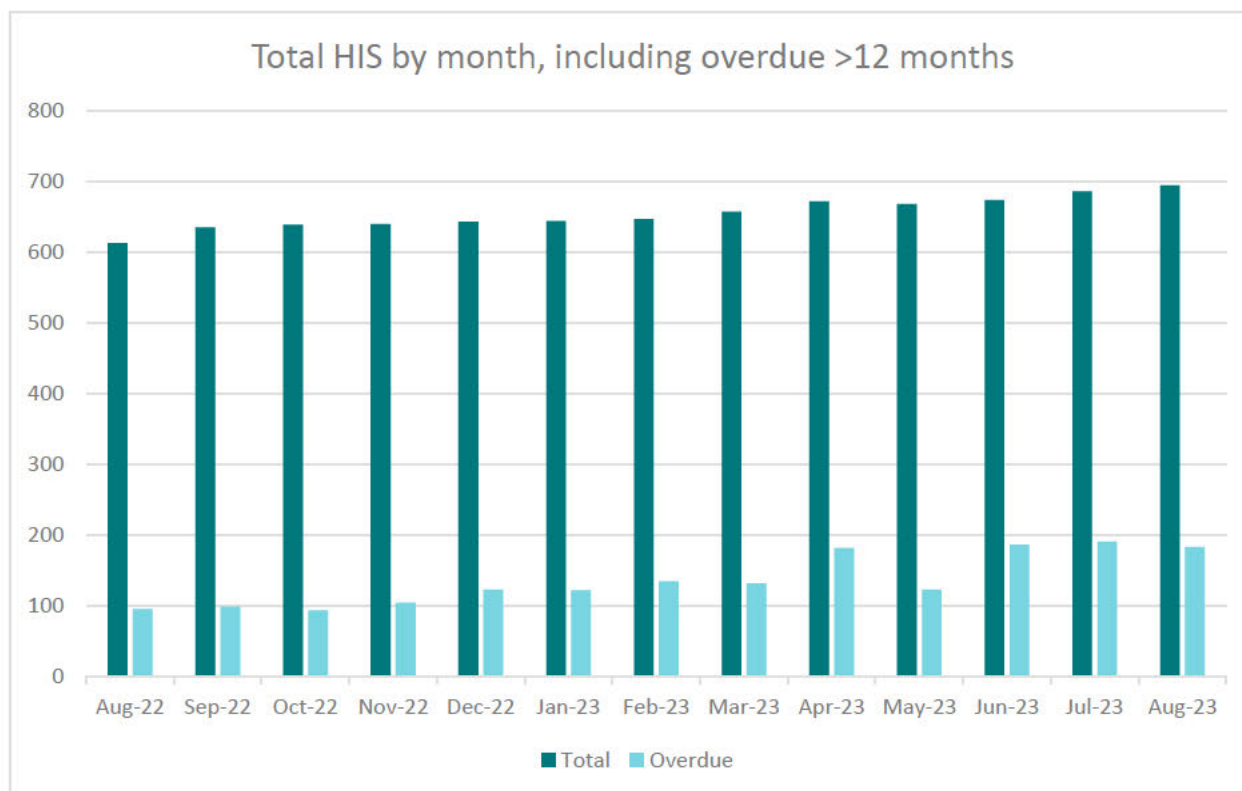
- VIP Checklist: what to take to hospital and what to do in the ward/room
- Alert signage to display for staff and visitors
- 'Vision Impaired Person' labels for patients to wear on their clothing
- 'Suggestions for Guiding' information sheet
- Signature guide with black pen to assist with signing documentation
- Contact details for ongoing support
- An audio version is available from Eyes for Life upon request.

How to order the kits

To request a kit for a patient currently in hospital contact CHS.QSII@act.gov.au during business hours, or for out of hours requests please contact the Afterhours Hospital Manager by calling Switchboard.

Health Information Sheets

The Consumer Handouts Committee continue to meet quarterly to finalise and endorse all HIS drafted by CHS for consumers. When the committee does not meet, out of session reviews are conducted monthly by the Chair and Secretariat. Submissions to the Committee have slowly increased since early 2023. The Committee includes four consumer representatives from Health Care Consumers Association ACT and ACT Mental Health Consumer Network. Endorsed HIS are listed on the Health Information Sheets register.



As of 1 August 2023, there were a total of 695 Health Information Sheets (HIS) on the Consumer Handouts Register, with 26.33% of these handouts overdue for review. This is an increase of 7.43% since the previous month. HIS data including HIS due for review, are sent to Divisions via the Quality and Safety Business Partners monthly for action.

Managing Overdue Handouts:

QSII are working with specific divisions to decrease numbers of overdue handouts. QSII is in the process of removing handouts that are overdue by more than 12 months from the Health Information Sheet Register.

Supply of Health Information Sheets:

QSII continues to conduct walkarounds on a quarterly basis to ascertain what HIS are on display in alignment with the essential HIS list. This list is available on the HealthHub: [Top 28 consumer handouts for your clinic, ward or waiting room \(sharepoint.com\)](#). QSII have a selection of hardcopy HIS available for clinical areas. Requests for supply of hardcopy HIS or for staff education should be emailed to consumer.handouts@act.gov.au.

Translation of Health Information for consumers:

QSII has recently reviewed the number of available translated HIS and have discovered that numbers are very low. QSII has updated information to encourage staff to consider translation of HIS upon request and finalising content. For more information, please contact consumer.handouts@act.gov.au

Inpatient Guide update:

QSII along with the Strategic Communication team and consumer organisations have conducted an in-depth review of the current Inpatient Guide. It has been decided that there will be separate information available for consumers into guides for Canberra Hospital, University of Canberra Hospital and North Canberra Hospital. The Guides are anticipated to be finalised by the end of 2023 in alignment with the CHS Branding Project. The content will be aligned with the Canberra Health Services website information.

Supply of the current Inpatient Guide has now been exhausted. No further stock will be ordered pending launch of the new Guides. In the interim please encourage patients to visit the Canberra Health Services website for information [Home - Canberra Health Services \(act.gov.au\)](https://www.act.gov.au/canberra-health-services)

Health information for Carers:

QSII along with Carers ACT have developed a Health Information Sheet for Carers. This handout describes support for the carer and how they can support the person that they are caring for whilst in hospital. Once endorsed, QSII will draft Carer Information for use in ambulatory and outpatient settings. These sheets will be added to the HIS Register for download and printing and added to the Essential Health Information Sheet list available on the HealthHub.

Education for staff:

There is an e-learning available for staff. Face to face education is bookable through HRIMS. For requests for in services in your area please email consumer.handouts@act.gov.au

Further information for staff:

QSII has HIS information and resources available. For more information go to the HealthHub link: [Health information sheets \(sharepoint.com\)](#)