

Measuring the patient experience on an acute medical unit using a validated tool and identifying areas for improvement – results from a small district general hospital

Authors: Christopher Asplin, Shirine Boardman and Fanwell Mamvura

Aims

To measure the patient experience on an acute medical unit (AMU) using a validated tool and compare this with nationally published data for AMUs in England in order to identify areas of shortfall that could be prioritised for improvement.

Methods

The national Adult Inpatient Survey (AIPS) is a validated tool for assessing how patients perceive their care during admission to hospital. The results, however, relate to the whole of the trust and do not show how individual clinicians can provide a better framework of care. The Future Hospital Commission 2013 recognised that an excellent patient experience is a key part of delivering effective medical care and that patient experience should be embedded into healthcare.

Sullivan *et al* (2013) used AIPS to evaluate the patient experience in short stay AMUs in England and published a national average (NA) baseline for scores. We used the questions and scoring system identified in AIPS by Sullivan *et al* (2013), and with the help of our patient advice and liaison service (PALS) department, surveyed 32 medical patients on our AMU on the day of discharge over a 3-week period.

Results

Our unit scored higher than the NA in 19 out of 22 questions, with 100% of patients responding that they were treated with respect and dignity (NA 76%), and 95% rated the unit good or excellent. In addition, 78% of patients felt that their family could ask questions if needed (NA 41%) and 94% of patients had confidence in our doctors and nurses (NA 74%). All patients (100%) reported having adequate privacy when examined (NA 86%).

However, only 63% of those surveyed felt they received sufficient information about their condition and treatment plan (NA 74%), while 19% of patients felt the nurses spoke as if they weren't there (NA 19%) and only 56% of patients felt that they

received printed information about the medicines they were prescribed (NA 62%).

Conclusions

We have measured the patient experience on our AMU with a validated tool, compared it with national data and identified areas for improvement. This can be easily undertaken on any AMU and provide consultants and senior nurses a way of directly measuring how their unit is performing. This creates an opportunity to improve patient experience during the often critical and fraught early phase of emergency medical care and may drive a cultural shift in AMUs. ■

Authors: Grantham and District Hospital, United Lincolnshire Hospitals NHS Trust, Grantham, Lincolnshire, UK