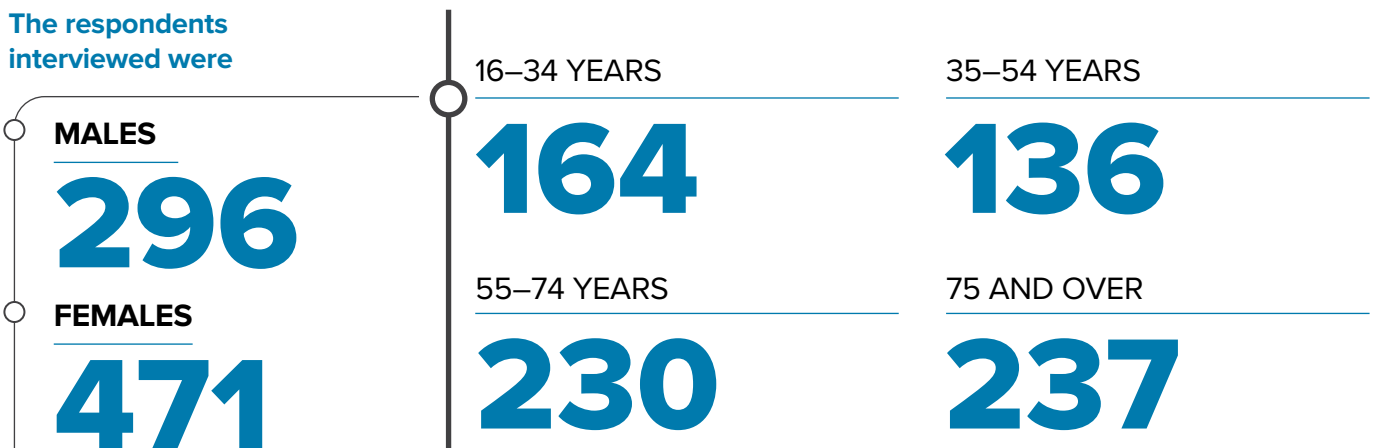


CULTURALLY AND LINGUISTICALLY DIVERSE (CALD)

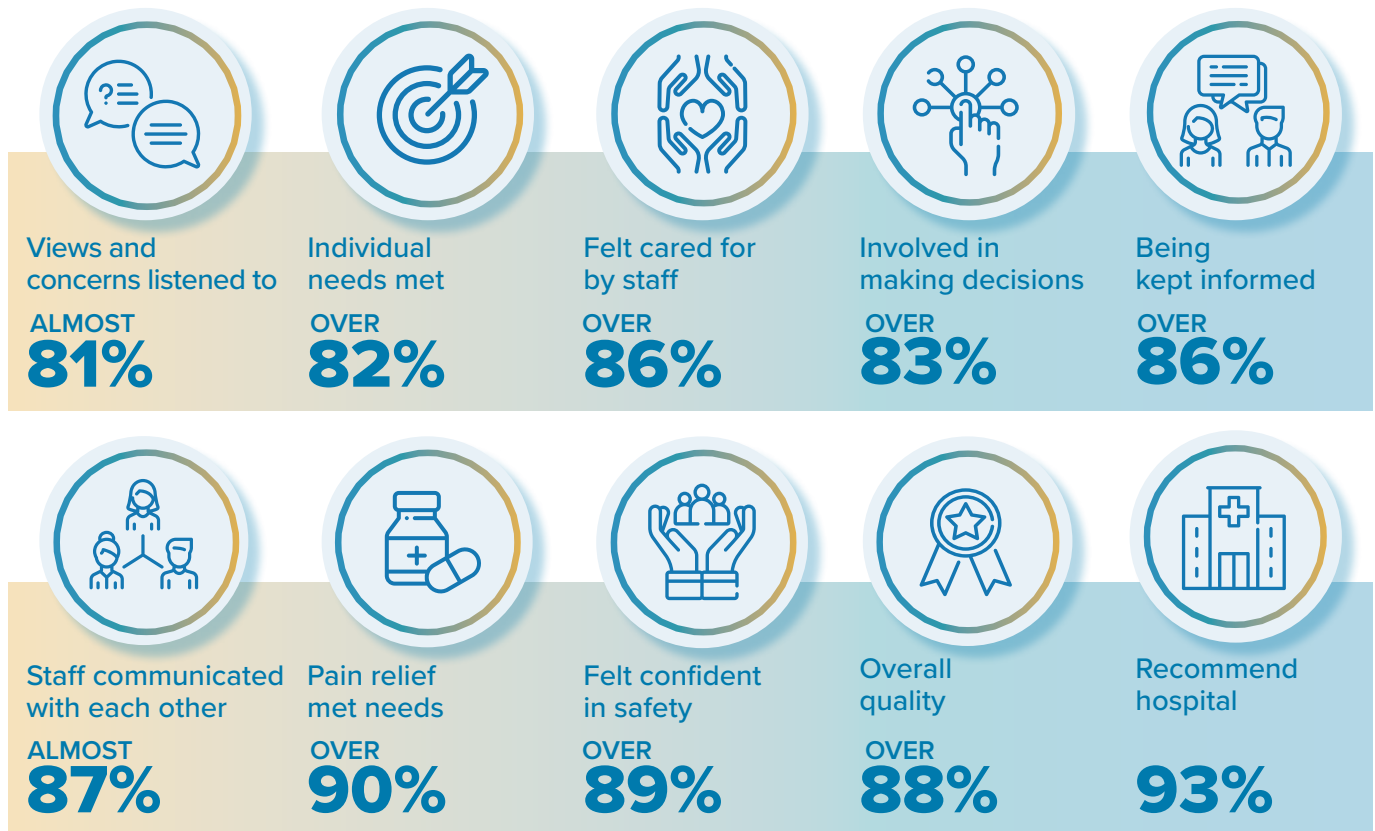
Measuring Consumer Experience 2022 Snapshot

As part of the SA Consumer Experience Surveillance (SACCESS) interviews for the year between January and December 2021, a total of **767 Culturally and Linguistically Diverse (CALD) consumers** were interviewed.

The respondents interviewed were



The consumers were asked the Australian Hospital Patient Experience Question Set (AHPEQS), where the majority of respondents responding either 'always' or 'mostly' when asked if:



Main languages spoken at home (other than English):

453

40 surveys were completed with language support

Languages include:

- Arabic
- Farsi
- Greek
- Italian
- Mandarin
- Spanish
- Vietnamese

INDIVIDUAL NEEDS WERE NOT MET

“MY INDIVIDUAL NEEDS WERE MET” WAS ASKED AND ANSWERED NEGATIVELY.

OF THE
132

CALD respondents who reported that their individual needs were not met mostly or always

OVER
25%

reported that staff explained why.

HARM OR DISTRESS DISCUSSED WITH STAFF

ALMOST
81%

of CALD respondents **did not** experience harm or/and distress as a result of their treatment and care.

OF THE
19.5%

that did experience harm or/and distress:

2.2%
had experienced physical harm

12.5%
experienced emotional distress

4.8%
experienced both

OF THE
148

CALD respondents who reported that they had experienced harm or distress:

147
responded to the follow up question

50%
of CALD respondents reported that their harm or distress was discussed with them.



WITH REGARDS TO PATIENTS' RIGHTS AND ENGAGEMENT:

ALMOST
69%

CALD of respondents **reported not being asked if they had any cultural or religious beliefs** that might affect their treatment,

Of the **31.2%** that did get asked, **26.7%** were asked after admission and **4.5%** were asked before admission.

Of the 220 consumers who **required an interpreter,**

77.9%

were given access to one.

THE MAJORITY OF CONSUMERS:

ALMOST
88%

felt that their right to an opinion was **always or usually respected.**

Each participant was given the opportunity to provide both a satisfied and dissatisfied qualitative comment about their experience, which was provided to the Local Health Networks (LHNs) and their hospitals.

A TOTAL OF 466 CULTURALLY AND LINGUISTICALLY DIVERSE (CALD) RESPONDENTS PROVIDED EITHER A SATISFIED OR DISSATISFIED COMMENT.

69%

SATISFIED OR DISSATISFIED COMMENTS

A TOTAL OF
348

satisfied comments were received and were most commonly related to the coordination and integration of care; doctors and nurses; respect for patients' values and expressed needs; physical comfort; other; information, communication and education; food; access to care; Emergency Department; transition and continuity; involvement of family and friends; and emotional support and alleviation of fear and anxiety

A TOTAL OF
286

dissatisfied comments were received and comments were most commonly related coordination and integration of care; physical comfort; doctors and nurses; respect for patients' values and expressed needs; transition and continuity; information, communication and education; access to care; food; involvement of family and friends; emotional support and alleviation of fear and anxiety; Emergency Department; and consumer feedback.