Person-centred care insights

Welcome to the ninth edition of Person-centred care insights. This edition highlights how health services across Australia are measuring and responding to patient experiences to drive improvements in the quality and safety of care. Through these stories, we showcase the many ways organisations are using feedback, insights and partnerships with consumers to strengthen person-centred care in practice. We hope these examples inspire new ideas and celebrate the remarkable work being undertaken across Australian health services and settings.

In this edition:

- Local updates and innovations
- New resources
- Events and news
- Publications.

NB. Inclusion of a program does not imply an endorsement from the Commission, but we hope you will find these stories inspiring and insightful.

Local updates and innovations

Patient experience tool for adolescents (AHPEQS Adolescent)

Perth Children's Hospital

Perth Children's Hospital (PCH) has developed an Adolescent Australian Hospital Patient Experience Question Set (AHPEQS), a patient experience survey designed specifically for young people aged 12 to 18 years. The tool was co-designed with young people who had accessed inpatient services at PCH and members of the Child and Adolescent Health Service (CAHS) Youth Advisory Group.

Young people involved in the project identified a preference for receiving the survey electronically after discharge from hospital. They also highlighted the importance of parents being aware of the survey so they could provide support if needed. In response, PCH sends the survey via SMS to a parent or carer, who is invited to share it with their young person for completion. This approach supports parental consent while reflecting the preferences of adolescents.

Survey responses are reviewed by the CAHS Youth Advisory Group and used to inform quality improvement initiatives across Perth Children's Hospital. The insights gained help ensure services continue to meet the needs and expectations of young patients.

The Australian Commission on Safety and Quality in Health Care (the Commission) supported the development of the AHPEQS Adolescent tool, which is available free of charge from the Commission's website.

Contact Hayley.Harrison@health.wa.gov.au to learn more.

Patient experience of Virtual Care: How a Virtual Hospital implemented and uses Patient Reported Experience Measures (PREMs)

Sydney Local Health District Virtual Hospital (Sydney Virtual)

Sydney Virtual (formerly known as RPA Virtual Hospital) has embedded patient experience data capture and analysis within service and governance structures since the virtual hospital launched in March 2020.This included the design and introduction of new, virtual care specific experience questions.

In August 2024, Sydney Virtual undertook a project to review these new survey questions, to minimise survey burden and ensure comparability across like services. At the time of the project over 7,000 surveys had been completed by Sydney Virtual patients. To ensure accessibility for non-English speaking patients, Sydney Virtual also self-funded the translation of its PREMs into the seven most common community languages.

To systematically embed the use of PREMs in service improvement, responses are analysed quarterly and shared with Sydney Virtual Executive and Managers. Local teams discuss their results and have implemented new strategies to improve care delivery.

Top tips and lessons learned

- Improving language accessibility for patients to share feedback has increased the relevance and usefulness of the survey results.
- Formal governance and reporting structures at a service and organisation level continue to support the engagement and use of PREMs.
- The importance of seeking regular feedback from patients and sharing the results with staff and the Sydney Virtual Consumer Network.

Contact Miranda.Shaw@health.nsw.gov.au to find out more.

Measuring What Matters: Consumer Partnerships in Family Engagement Scale Development

Gold Coast University Hospital and Griffith University

Family engagement is essential to person-centred care, yet no standardised instruments exist to measure how nurses facilitate this in adult acute care settings. The team addressed this gap by developing and validating a 23-item scale with consumers as investigator partners.

The consumer voice was central to this work. Two consumers with lived experience as family caregivers contributed to item development, refinement and scale assessment. Their authentic perspectives ensured scale items reflected real-world family experiences. Broader engagement with six additional consumers shaped the final instrument.

Consumer input was transformative, influencing which items were retained, revised or removed. Their involvement from early development stages grounded the instrument in what really matters to families navigating acute care, so that the integration of person-centred care into clinical practice is meaningful and improves outcomes for consumers. Consumer collaboration continues with partner investigator insights and experiences informing broader scale implementation and dissemination.

Top tips and lessons learned

- Involve consumers early in conceptualisation not just refinement.
- Use accessible communication formats enabling broad participation.
- Multiple feedback rounds ensure genuine influence.

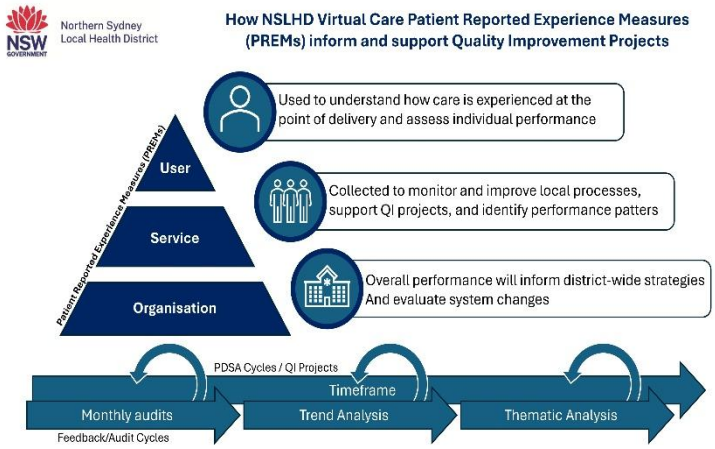
Contact julie.cussen@health.qld.gov.au to find out more

Virtual Care PREMs to guide local and system changes

Northern Sydney Local Health District

Northern Sydney Local Health District (NSLHD) has embedded a robust process to collect, monitor, and evaluate Virtual Care Patient Experience Measures (PREMs). After each video consultation, patients are automatically directed to an online PREM survey. Patient feedback is audited monthly, with insights shared at user, service, and organisational levels. Detailed trend analyses occur every six months, with a comprehensive thematic review conducted annually. PREMs are also used to evaluate larger system changes.

Conducted for 6 months over 2025-2026, NSLHD measured the impact of implementing Healthdirect Video Call. From over 1,700 responses, data showed increased patient experience, with an approval rate around 99%. Additionally, more than 93% rated Virtual Care as ‘better’ or ‘about the same’ as, in-person care.



Findings reflect a strong person-centred approach, with patients feeling heard, involved, and able to access care more conveniently. Insights also supported technical and operational improvements, including reduced wait times and fewer technical issues.

Top tips and lessons learned

- Technology can automate the collection of patient experience.
- PREMs must be audited regularly to identify quality improvement opportunities on a user, service, and organisation level.
- Patient feedback can be used to monitor and evaluate district changes.

Contact NSLHD-VirtualCare@health.nsw.gov.au to find out more.

Triangulating experience and feedback data to drive experience of care initiatives

Eastern Health

In 2025, the Eastern Health Patient Experience Team piloted an innovative approach to support patient experience improvement by triangulating multiple feedback and experience data sources. Patient complaints and compliments, internal Patient Experience Survey results and Victorian Healthcare Experience Survey data were analysed for four wards. Qualitative data were themed and presented alongside quantitative data to generate actionable insights for multidisciplinary teams.

Findings were shared through improvement workshops where nursing, allied health and medical teams identified practical 'quick wins' to enhance patient experience. Initiatives were tested using The Plan-Do-Study-Act (PDSA) methodology with support from patient experience and improvement teams. Examples included reducing overnight call bell noise, increasing use of "preparing for home" envelopes, and introducing afternoon quiet time.

Top tips and lessons learned

- Busy clinicians value synthesised insights.
- Triangulated data and themed qualitative feedback enabled teams to easily identify priorities and focus improvement efforts where they matter most to patients.

Contact verity.speed@easternhealth.org.au to find out more.

The paediatric Patient-Reported Experience Measure (pPREM): Validation and feasibility across Australia

Children's Healthcare Australasia Starlight Children's Foundation, The Sydney Children's Hospital Network, NSW Women's and Children's Health Network, SA Royal Children's Hospital, VIC Royal Darwin Hospital, NT Liverpool Hospital, NSW University of New South Wales

The paediatric Patient-Reported Experience Measure (pPREM) is a new 15-item self-report instrument designed for children aged 6-11 years in Australian paediatric hospital settings. The pPREM tool has been co-designed with Australian children and is intended to be completed by children themselves.

In the first phase of the pPREM's design and validation, twenty-one children in hospitals across Australia participated in interviews to evaluate how understandable, usable and relevant the pPREM items and rating scales were to them. In the second phase of the pPREM's development and validation, the pPREM tool was tested with a sample of 186 children from hospitals across the country.

Results showed that the measure was feasible, valid, and internally reliable. Feedback is currently being sought from stakeholders across Australia and New Zealand on the feasibility and sustainability of the pPREM tool. This will also provide solutions for implementation of the pPREM across a broad range of paediatric healthcare settings, to support the voice of children wherever they receive care. Read more here: Validating a codesigned paediatric patient reported experience measure: a study protocol

Top tips and lessons learned

- It is crucial that paediatric experience measures are co-designed by the young people who will use them.

- The pPREM measure developed has been validated in hospital settings across the country.
- Seeking feedback from stakeholders to support the implementation of the pPREM is important, and currently underway.

Contact a.stylianakis@unsw.edu.au if you would like to know more.

New PREM, just for surgical patients

Griffith University and Gold Coast Health

A new surgical Patient-Reported Experience Measure (PREM) is set to provide deeper insights into how patients experience patient-centred care in Australian hospitals to assess whether care aligns with their values, preferences, and needs. A review commissioned by the Sax Institute found existing surgical PREMs were too generic, lacked coverage of the full surgical journey, and were not developed with sufficient methodological rigour.

In response, health consumers, clinicians, clinical excellence staff, and researchers co-designed a PREM tailored to surgical patients. Over 439 patients across three Queensland hospitals completed the survey, enabling psychometric analysis, a statistical process that tests whether a survey is reliable (consistent) and valid (accurate).

Top tips and lessons learned

- It's essential to gather data that reflects the unique experiences of surgical patients. This enables more targeted and effective improvement efforts.
- Engaging both consumers and clinicians when developing PREMs ensures the data collected is relevant, useful, and aligned with the needs of those who use and deliver care.
- Rigorous testing helps ensure PREMs are valid, reliable, and capable of driving quality improvement.

Contact g.tobiano@girffith.edu.au to find out more.

Partnering for Impact: PROM-PATH's Consumer Engagement

The University of Sydney and the Agency for Clinical Innovation

PROM-PATH is a research program between the University of Sydney and the Agency for Clinical Innovation (ACI, a branch of NSW Health). PROM-PATH explores 5 research areas related to the collection and use of patient-reported outcome measures (PROMs) for chronic conditions.

PROM-PATH embeds the consumer voice at all stages - from grant development, study design, data collection and analysis, to dissemination (including publication of a study protocol and a systematic review). At the recent ACI Patient Reported Measures (PRMs) Symposium, PROM-PATH showcased how meaningful consumer engagement is transforming research. Consumer advisor Brad Rossiter (pictured) led the presentation alongside Jessica Nikolovski, Research Associate and PhD candidate at the University of Sydney.

Brad's symposium highlight was being himself and speaking informally. As part of the PROM-PATH research team, he values the ongoing open communication, his partnership with fellow consumer advisor Marg Fagan and the incorporation of his feedback and advice. Jessica values the openness, generosity and enthusiasm of the consumer advisors.

Top tips and lessons learned

- Start with trust. A friendly, open environment fosters collaboration and shared purpose within a team.

Contact jessica.nikolovski@sydney.edu.au if you would like to know more.

The Knee for Change

Illawarra Shoalhaven Local Health District

A rehabilitation initiative at Port Kembla Hospital is helping people recover from total knee replacement surgery through a more connected and patient-centred approach. Led by physiotherapist Jayden Smileski, the program used Patient-Reported Outcome Measures (PROMs) via the Health Outcomes and Patient Experience (HOPE) platform to capture patient feedback on pain, mobility and recovery progress.

Thirty-two patients participated in a five-week program of twice-weekly group physiotherapy sessions. Participants reported improvements in pain, mobility and confidence, while the group setting provided peer support and motivation throughout recovery.

The initiative also highlighted the value of group-based rehabilitation as an efficient and cost-effective model of care, creating opportunities to expand patient-centred services across the health system while maintaining strong patient outcomes.

Top tips and lessons learned

- Using PROMs helped clinicians better understand each patient's recovery experience and tailor support accordingly.
- Group sessions fostered encouragement, motivation and shared understanding between patients.
- Patient-centred innovation can improve both patient experiences and service delivery across the broader health system.

Contact jayden.smileski@health.nsw.gov.au to learn more.

Measuring what Matters to Australian Mothers: From co-design to national validation

Curtin University

Measuring what Matters to Australian Mothers (MMAMs) continues to build momentum developing national, consumer co-designed maternity PREMs and PROMs that reflect what matters most during pregnancy, birth and the first six weeks postpartum. We have completed three eDelphi rounds, drawing 550+ responses (200+ from consumers), and held consumer focus groups to refine the surveys. We are delighted to share our Consumer Fellow's first-author paper below, setting out five principles for rigorous consumer co-design, and already gaining international interest. MMAMs now moves into national psychometric validation, with 600+ pregnant and postnatal Australians testing survey validity, reliability and readiness for real-world use. If you are pregnant or had a baby in the last 6 months, we'd love you to participate. To share this survey in your networks, please get in touch for a share pack.

Top tips and lessons learned

- Authentic consumer co-leadership is essential
- A dedicated Consumer Fellow role, supported by an Expert Consumer Group ensured consumer priorities were embedded in the development, refinement and validation of Australia's first co-designed maternity PREMs and PROMs.

Contact lauren.spark@curtin.edu.au for more information.

From Insight to Impact: Embedding Consumer Partnership in Designing Services

healthAbility

At healthAbility, an independent, not-for-profit community health organisation, patient experience has been strengthened as a driver of quality improvement through the combination of structured surveys and lived-experience partnerships. Alongside routine Net Promoter Score (NPS) and experience surveys, a paid Community Champions Advisory Group (CCAG) was established to co-design service improvements and test changes early.

Insights from CCAG and client experience engagement demonstrated that clients value more than just clinical outcomes. They prioritise clear communication, ease of access, and feeling respected across the whole journey. This feedback has directly informed improvements to client communications, service design, and the service suite structure, making services easier to understand and navigate.

Consumer input is now embedded early in planning and decision-making, shifting from consultation to genuine partnership. This approach has increased the survey response rates, improved client experience scores, strengthened staff understanding and ownership of person-centred care, and is helping to build a more responsive, person-centred service model.

Top tips and lessons learned

- Involve consumers early to shape, not validate, decisions and designs.
- Combine survey data with lived experience insights.
- Test changes before implementation to reduce risk.
- Focus on the whole journey, not just the clinical interaction.
- Feed results back to staff to drive ownership and change.
- Close the loop with staff and clients by showing how feedback drives change.

Contact servicedesign@healthability.org.au to learn more.

New resources from the Commission

Informed consent: New fact sheets to support patients, substitute decision-makers and clinicians

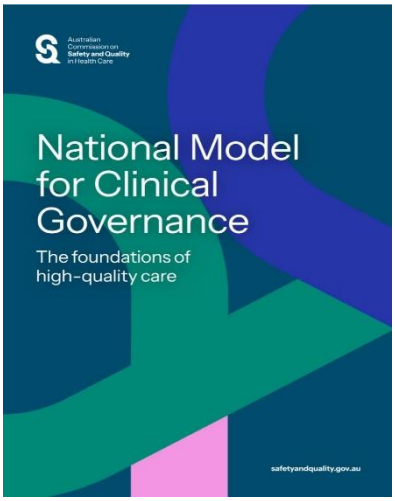
The Australian Commission on Safety and Quality in Health Care (the Commission) has released three new fact sheets to support informed consent for clinicians, patients and substitute decision-makers. Informed consent is both a process of engagement and an outcome that recognises and respects patient autonomy and their healthcare rights.

The resources provide practical guidance on the key elements of informed consent, what supports should be provided, and what people can expect throughout the consent process. Developed in consultation with consumers and clinicians, the fact sheets aim to support better conversations about healthcare options, risks, benefits and alternatives, while strengthening shared decision-making and patient partnership in care.

Visit the Informed consent webpage to access the fact sheets and learn more.

National Model for Clinical Governance

The Commission has released the National Model for Clinical Governance, providing health services with contemporary guidance to support the delivery of consistently high-quality care.



The national model replaces the 2017 *National Model Clinical Governance Framework* and represents a significant shift in how clinical governance is understood, led and embedded across Australian health services. Organised around six foundations of clinical governance, the principles-based model is designed to help health services review and strengthen their governance systems, culture and leadership arrangements.

At their 1 May 2026 meeting, Australian Health Ministers encouraged all public and private health services to implement the national model. The model highlights the critical role of boards, executives and the workforce in improving safety, quality and accountability. The six foundations of the national model will also form the structure of the Clinical Governance Standard in the next edition of the National Safety and Quality Health Service (NSQHS) Standards.

A implementation guide and frequently asked questions about the Model are also available online.

New Resource Hub: Supporting Shared Decision-Making in Practice

The Commission has launched a new Shared Decision-Making Resource Hub, bringing together evidence-based guidance and tools to help health professionals engage patients in decisions about their care.

The hub is organised into five key sections:

- Guiding foundations: the 'what' and 'why' of shared decision-making
- Training and communication skills: the how, including risk communication and consultation structure
- Patient decision aids and question prompts: practical tools to use before, during and after consultations
- First Nations: culturally safe shared decision-making resources and frameworks
- Measurement and quality improvement: validated tools to evaluate whether shared decision-making is happening in practice.

Shared decision-making remains a national safety and quality priority, embedded in the National Safety and Quality Health Service Standards and Australian Charter of Healthcare Rights. This hub is designed to make it easier for clinicians and teams to put that priority into practice, whether you're looking for foundational concepts, communication skills training, or tools to measure progress.

The Commission also maintains a dedicated webpage for consumers and their support people, with resources to help them take part in shared decision-making conversations with their health professionals.

We encourage you to explore the new hub and share it with your teams.

Events and news

Person-centred care in practice webinar series | From disability identification to inclusion

The Commission's most recent *Person-centred care in practice* webinar was held on 16 July 2026 and featured the Victorian Disability Liaison Officer (DLO) Program Disability Identifier Project.

The webinar explored how health services can provide more accessible, person-centred care for people with disability through the collection of self-reported disability information. The Disability Identifier has been co-designed with people with disability, carers, clinicians and technical experts and enables people to communicate their support needs before attending or staying in hospital.

The Project Lead for the Victorian Hospital Disability Identifier Initiative and members of the Disability Liaison Team at The Royal Children's Hospital Melbourne, shared a presentation highlighting the insights into the development, implementation and practical outcomes of the project, including how disability identifiers support more responsive and individualised care.

Anna Flynn, Director, Partnering with Consumers at the Commission, was joined by a panel of speakers from the Parkville Precinct, Austin Health and The Royal Children's Hospital Melbourne for an engaging question and answer session following the presentation.

The recording of the webinar is now available: Person-centred care practice webinar series.

Registrations open – National Medicines Symposium 2026

The Commission will host the National Medicines Symposium (NMS) 2026 on Wednesday, 11 November 2026. This year's theme, *Medicines stewardship: safer use starts with all of us*, will explore strategies, interventions and tools to improve the safe and quality use of medicines across the Australian healthcare system.

The virtual symposium will bring together leading clinicians, researchers, policymakers and individuals with lived experience to share strategies, interventions and tools to improve the safe and quality use of medicines throughout Australia.

Topics will include antimicrobial stewardship, penicillin allergy delabelling, multidisciplinary approaches to medicines stewardship, improving outcomes for priority populations, and the role of digital health and technology in supporting safer medicines use.

With expert presentations, panel discussions, case studies and interactive question-and-answer sessions, NMS 2026 offers a unique opportunity to hear diverse perspectives and gain actionable insights. For more details, including the full agenda, keep an eye on the Commission's website.

Register now for the National Medicines Symposium for 2026

Recent publications

Below are some recent publications on person-centred care, with a focus on measurement. *Inclusion of publications is not an endorsement or recommendation of any publication or provider*.

Access to documents may depend on whether they are Open Access and/or your individual or institutional access to subscription sites/services. Material that may require a subscription is included as it is considered relevant.

1. Nelson HJ, Harrison H, McKenzie K, Williams AM, Swaminathan G, Mörelius E. **Developing a child-reported measure of inpatient experience of healthcare. *Journal of Child Health Care*** 2025;30(2):293-306. doi:10.1177/13674935251344644 https://journals.sagepub.com/doi/abs/10.1177/13674935251344644

2. Engstrom T, Petrie C, Pinzon Perez W, Sullivan C, Pole JD. **One Size Fits None. How can we do better? using patient reported experience measure findings to drive local quality improvement across wards in a large Australian metropolitan hospital**. *International Journal of Medical Informatics*2025;204:106078. doi:10.1016/j.ijmedinf.2025.106078 https://www.sciencedirect.com/science/article/pii/S1386505625002953

3. Larson E, Sharma J, Bohren MA, Tunçalp Ö. **When the Patient Is the Expert: Measuring Patient Experience and Satisfaction with Care**. *Bulletin of the World Health Organization*2020;97(8):563-569. doi:10.2471/blt.18.225201 https://www.researchgate.net/publication/334658562_When_the_patient_is_the_expert_measuring_patient_experience_and_satisfaction_with_care

4. Katharaki M, Triantafyllou C, Ling J, Breda J. **Patient-reported outcome measures in palliative care: A systematic review to inform health policy and health system performance**. *Health Policy*2026;172:105688. doi:10.1016/j.healthpol.2026.105688 https://www.sciencedirect.com/science/article/pii/S0168851026001259

5. Jayasinghe RT, Ahern S, Maharaj AD, Romero L, Ruseckaite R. **Implementing patient-reported outcome measures: A scoping review of existing guidance across clinical trials, practice and registries.** *Public Health*2026;252:106138. doi:10.1016/j.puhe.2026.106138 https://www.sciencedirect.com/science/article/pii/S0033350626000053

6. Verlis K, McCaffery K, Copp T, Dodd R, Nickel B, Laidsaar-Powell R. **Australian private healthcare staff perspectives on patient reported experience measures (PREMs): a qualitative interview study.** *Journal of Patient-Reported Outcomes*, *8*(1). https://doi.org/10.1186/s41687-024-00809-6 https://link.springer.com/article/10.1186/s41687-024-00809-6

7. Hüllemann M, Leitner M, Tahmasebi-Gandomkari S, Hajek A, König HH. **Relevance of quality indicators for supporting patients' choice of hospitals: a systematic review.** *Journal of Public Health*Published online August 1, 2026. doi:10.1007/s10389-026-02861-6 https://link.springer.com/article/10.1007/s10389-026-02861-6

8. Schlage K, Spark LC, Callander EJ, Leefhelm E, Bradfield Z. **From participants to partners: a strategy for establishing a national consumer fellow to lead the co-design of maternity patient-reported experience measures (PREMs) and patient-reported outcome measures (PROMs).** *Journal of Patient-Reported Outcomes*2026;10(1). doi:10.1186/s41687-026-01065-6 https://link.springer.com/article/10.1186/s41687-026-01065-6