

TRUST BOARD PART I – MAY 2012

Agenda Item Number: 75/12

Enclosure Number: (7)

<p><b>Subject:</b></p>	<p><b>National In-patient Survey 2011</b></p>
<p><b>Prepared by:</b></p> <p><b>Sponsored by:</b></p> <p><b>Presented by:</b></p>	<p>Sarah Balchin, Head of Patient Experience</p> <p>Julie Dawes, Director of Nursing</p> <p>Julie Dawes, Director of Nursing</p>
<p><b>Purpose of paper</b> <i>Why is this paper going to the Trust Board?</i></p>	<p>Discussion by the Board</p>
<p><b>Key points for Trust Board members</b> <i>Briefly summarise in bullet point format the main points and key issues that the Trust Board members should focus on including conclusions and proposals</i></p>	<ul style="list-style-type: none"> <li>• Results of the national inpatient survey show an overall improvement since 2009.</li> <li>• Of the 10 sections, nine have improved, one has remained the same (admissions) and none has deteriorated.</li> <li>• Areas of best performance include infection prevention and control, privacy and dignity, and communication related to operations and procedures.</li> <li>• Areas of poorest performance included opportunities to give views on care, choice of admission dates, and medication issues on discharge.</li> <li>• The Trust failed to achieve the required 3 point rise for the CQUIN 5 key questions. This did not result in a financial penalty this year but will from 2012/13. The sum will be up to £436,500.</li> <li>• A Quality Improvement Delivery Group (QIDG) has been developed and implemented to provide a focussed approach. The group will account to the Patient Experience Steering Group and the Quality Income Protection Group. Monthly performance monitoring will be introduced to the CSC performance meetings.</li> </ul>
<p><b>Options and decisions required</b> <i>Clearly identify options that are to be considered and any decisions required</i></p>	<p>To note the results of the report</p> <p>To note the financial risk of failing to achieve the 2012/13 CQUIN target</p> <p>To support the implementation of the QIDG</p>
<p><b>Next steps / future actions:</b> <i>Clearly identify what will follow the Trust Board's discussion</i></p>	
<p><b>Consideration of legal issues</b> (including Equality Impact Assessment)?</p>	
<p><b>Consideration of Public and Patient Involvement and Communications Implications?</b></p>	

## CARE QUALITY COMMISSION BENCHMARK – SURVEY OF ADULT INPATIENTS 2011

Based on patients' responses to the survey, this trust scored		How this score compares with other trusts
<b>7.7/10</b>	<p>Click to expand for questions about</p> <p><b>The emergency / A&amp;E department, answered by emergency patients or</b></p>	<p>WORSE <b>ABOUT THE SAME</b> BETTER</p>
<b>6.1/10</b>	<p>Click to expand for questions about</p> <p><b>Waiting lists and planned admissions, answered by those referred to hospital</b></p>	<p>WORSE <b>ABOUT THE SAME</b> BETTER</p>
<b>8.5/10</b>	<p>Click to expand for questions about</p> <p><b>Waiting to get to a bed on a ward</b></p>	<p>WORSE <b>ABOUT THE SAME</b> BETTER</p>
<b>8.3/10</b>	<p>Click to expand for questions about</p> <p><b>The hospital and ward</b></p>	<p>WORSE <b>ABOUT THE SAME</b> BETTER</p>
<b>8.5/10</b>	<p>Click to expand for questions about</p> <p><b>Doctors</b></p>	<p>WORSE <b>ABOUT THE SAME</b> BETTER</p>
<b>8.2/10</b>	<p>Click to expand for questions about</p> <p><b>Nurses</b></p>	<p>WORSE <b>ABOUT THE SAME</b> BETTER</p>
<b>7.3/10</b>	<p>Click to expand for questions about</p> <p><b>Care and treatment</b></p>	<p>WORSE <b>ABOUT THE SAME</b> BETTER</p>
<b>8.5/10</b>	<p>Click to expand for questions about</p> <p><b>Operations and procedures, answered by patients who had an operation or procedure</b></p>	<p>WORSE <b>ABOUT THE SAME</b> BETTER</p>
<b>6.4/10</b>	<p>Click to expand for questions about</p> <p><b>Leaving hospital</b></p>	<p>WORSE <b>ABOUT THE SAME</b> BETTER</p>
<b>5.6/10</b>	<p>Click to expand for questions about</p> <p><b>Overall views and experiences</b></p>	<p>WORSE <b>ABOUT THE SAME</b> BETTER</p>

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## 1. INTRODUCTION

1.1. This paper reports the results of the 2011 National In-Patient Survey. It also provides a comparison of the Trust performance over a three year period, a benchmark against other Trusts and outlines the agreed quality improvement delivery plan.

## 2. THE SURVEY

### 2.1. Purpose

To understand the quality of services that we deliver, and fulfil contractual obligations, the Trust participated in the annual national in-patient survey. The survey includes the CQUIN 5 key questions on which the trust performance against the required improvement of 0.2 points will be measured for 2012/13 (see section 3.2)<sup>1</sup>. Failure to meet this target will incur an incremental financial penalty of up to £436,500. Adults (people aged 16 years and over in adult services) who were in-patients for a minimum of one night during August 2010 (excluding maternity services) invited 850 people to provide feedback on their experience.

### 2.2. Survey Structure

The survey comprises 10 sections:

- 1 The Emergency Department ( answered by emergency patients only)
- 2 Waiting list and planned admissions (answered by those referred to hospital)
- 3 Waiting to get a bed on a ward
- 4 The hospital and ward
- 5 Doctors
- 6 Nurses
- 7 Care and treatment
- 8 Operations and procedures (answered by patients who had an operation or procedure)
- 9 Leaving hospital
- 10 Overall views and experiences

#### 1.1. Responses

508 (62%) patients responded against a national average of 53%. This response rates indicates a high level of reliability. The respondents ranged from 16 years to 66 years and over, with 59% from the latter category.

#### 1.2. Data Presentation

The data is presented as a score for each question, compared against the range of results from all other trusts that took part in the survey. It is designed to help understand local performance and to identify areas for improvements.

#### 1.3. Interpreting the results

The reports for the 2011 survey have been redesigned. Scores are provided out of 10, rather than 100 as previously. This change is in response to a level of confusion about the 100 available points score being misinterpreted as a percentage score.

The results are reported by individual question and by section. Individual responses to each question are converted into a score on a scale out of 10, with 10 representing the best possible

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<sup>1</sup> The scoring system has changed from a score out of 100 to a score out of 10. The previously agreed target of a 2 point rise has been converted to a 0.2 rise to reflect this.

response. Each section also has a numerical score out of 10 and a benchmark rating of green (better than most other trusts), amber (about the same) and red (worse than most others).

Results have been standardised to take into account the different profile of patients including age, gender and method of admission. This ensures accurate comparison of results from other trusts with different profiles of patients.

## 2. RESULTS

### 2.1. Overall Score – 2009 2011

For 5 years to the 2009 survey report, there had been a year on year deteriorating position. Since 2009, there has been an improved score in 9/10 sections. There has been no deterioration in any section, with admissions remaining the same.

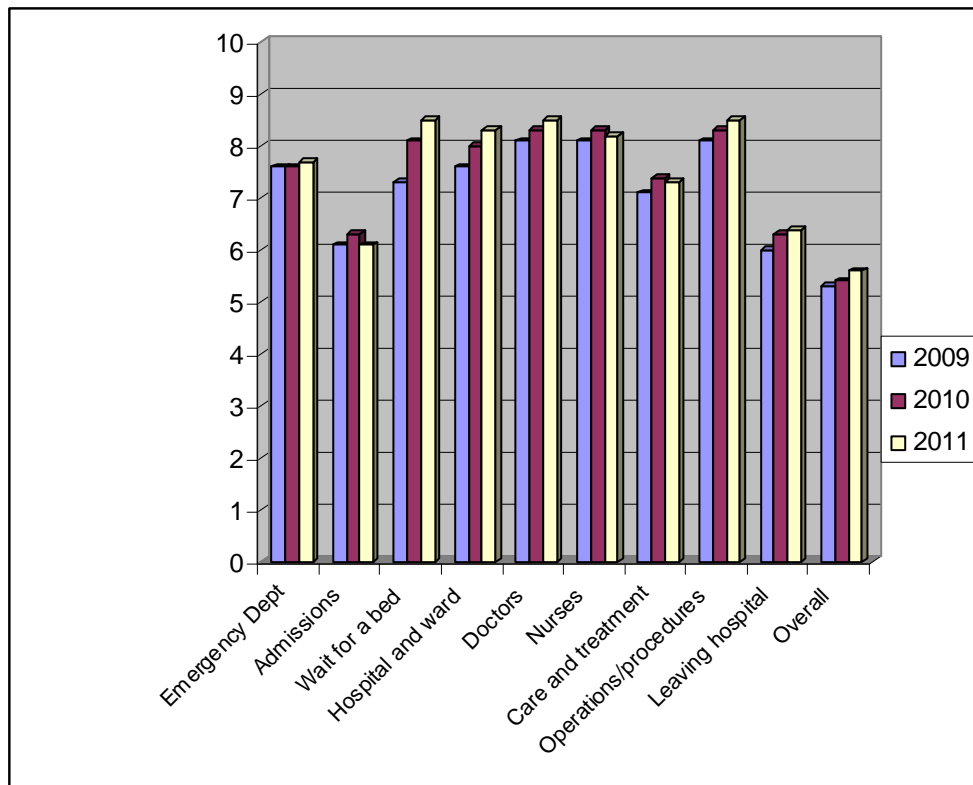


Figure 1 - Overall Score 2009 - 2011

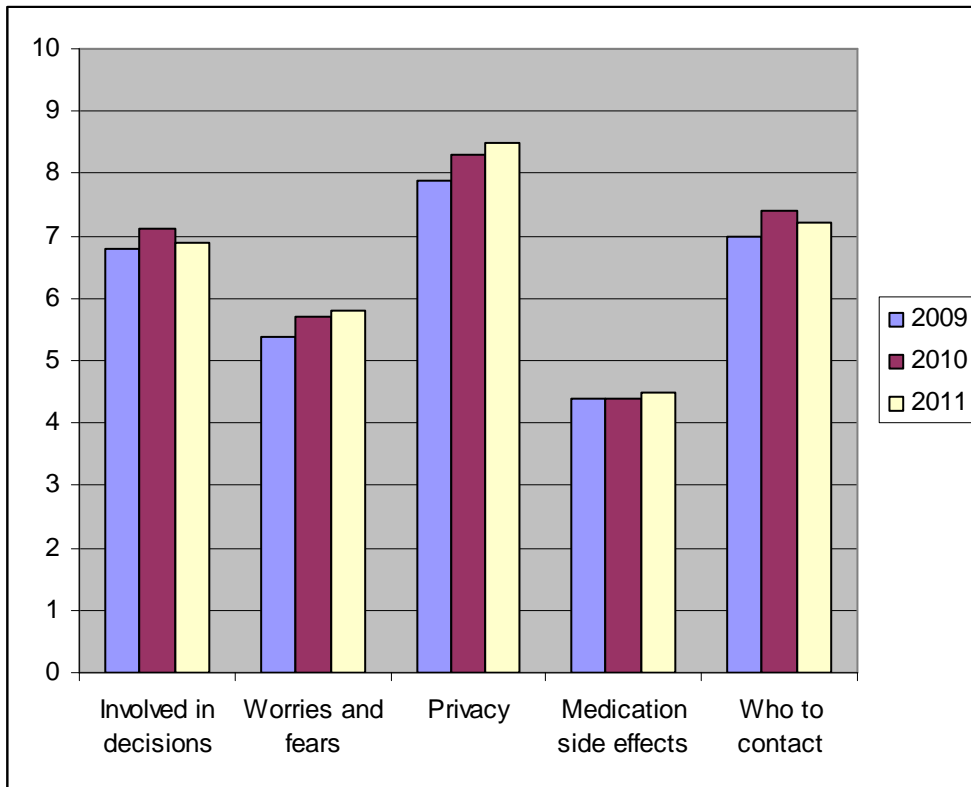
### 2.2. 5 Key Questions

The 5 key questions (see figure 2) are measured and reported as part of the national inpatient survey. The trust performance has been variable over the past three years. Small but not significant overall improvements have been achieved in all questions but in 2011/12 the trust failed to achieve the three point increase required in the contract. 2012/13 requires a 0.2 point increase from 6.59 – 6.79 by February 2013. (It must be noted that the scoring system has changed in 2012 from a score out of 100 to out of 10, with 10 being the best possible score.)

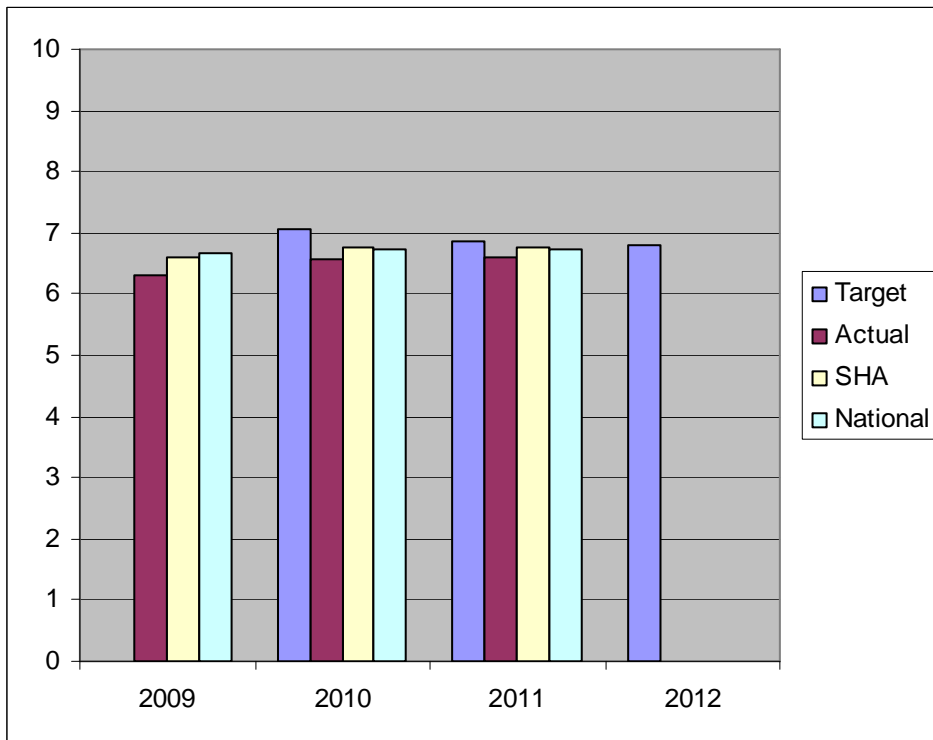
- Were you involved as much as you wanted to be in decisions about your care and treatment?
- Did you find someone on the hospital staff to talk to about your worries and fears?
- Were you given enough privacy when discussing your condition or treatment?
- Did a member of staff tell you about medication side effects to watch for when you went home?

- Did hospital staff tell you who to contact if you were worried about your condition?

**Figure 2 - The 5 Key Questions**



**Figure 3 - 5 Key Questions 2009 - 2011**



**Figure 4 - 5 Key Questions - actual, target, SHA and national scores**

### 3. FULL SURVEY RESULTS

The survey comprises 64 experience related questions. The responses are benchmarked and rated as performing better than most, about the same or worse than most other trusts. This is a change from previous reports when trusts were ranked as top 20%, about the same and bottom 20% of performing trusts. For 60/64 questions, the trust was ranked as about the same as others. For 2 questions, choice of admission dates and provision of copies of letters written in a way that the patient could understand, the trust was ranked as performing worse than most other trusts. Explanation of operation and procedures and the availability of somewhere to keep personal belongings were ranked as better than most other trusts (full results at Appendix 1).

The ten worst scores are detailed in table 1 below. Of these, two are CQUIN questions and pose a significant financial penalty risk as described in section 2.1. A focussed programme of work to drive improvements in response to the whole survey has been initiated.

Ranking	Number	Question	Trust Score	National Range	CQUIN question
1	Q76	During your hospital stay, were you ever asked to give your views on the quality of your care?	0.9	0.4 – 4.1	
2	Q10	Were you given a choice of admission dates?	1.3	1.2 – 4.9	
3	Q77	While in hospital, did you ever see any posters or leaflets explaining how to complain about the care you received?	3.5	2.6 – 6.7	
4	Q71	Did you receive copies of letters sent between hospital doctors and your family doctor (GP).	4.2	2.2 – 9.3	
5	Q68	Did a member of staff tell you about any danger signals you should watch for after you went home?	4.5	4.0 – 7.6	
6	Q65	Did a member of staff tell you about the medication side effects to watch for when you went home?	4.5	3.4 – 7.6	YES
7	Q28	How would you rate the hospital food?	5.1	4.1 – 7.8	
8	Q44	Did you find someone on the hospital staff to talk to about your worries and fears?	5.8	4.3 – 7.9	YES
9	Q61	Discharge delayed due to wait for medications/see doctor/ wait for an ambulance	6.0	4.7 – 8.2	
10	Q8	Overall, from the time you first talked to a health professional about being referred to hospital, how long did you wait to be admitted to hospital?	6.1	4.6 – 8.9	

**Table 1 - Bottom 10 Results**

#### **4. QUALITY IMPROVEMENT DELIVERY PLAN**

##### **4.1. The Plan**

The plan comprises three elements:

- To increase the number of survey participants in each CSC for the local surveys to improve the reliability of the data related to the national survey questions, with a specific focus on the 5 key questions.
- The implementation of a Quality Improvement Delivery Group, with nominated leads for each of the 5 key questions.

- The introduction of more robust system of review and monitoring via the Patient Experience Steering Group and the Quality Income Protection Group.

*To increase in the number of survey participants in each CSC for the local survey.*

Currently the number of respondents for the local survey available via the web and in paper form is very small ranging from 73 – 89 responses per month. This does not provide a representative sample of the hospital population or a reliable indication of the likely year end score. To improve the robustness of the data, a number of changes have been made and are being implemented:

- There is now a dedicated 5 key question survey on the local real time system. This allows for a very short survey to be completed directly via the web by patients/families or paper copies can be used at ward level and data inputted.
- The real time system has been amended to ensure that all results from the 5 key questions from any in-patient survey on the system, are amalgamated in an overall score, reported by Trust level and CSC.
- A review of in-patient activity by CSC has led to the development of a target participation rate. An incremental increase from 2.5% to 10% of activity over the year is planned.

*The development and implementation of a focussed delivery group*

A Quality Improvement Delivery Group has been formed with a designated Trust wide lead for each key question with a lead accountable officer. This allows for the delegation of the action plan development and delivery to another member of the team but the individual retains overall accountability for the delivery of the improvements. The inaugural meeting is on 28 May. Leads will present the outcome of the scoping exercise and the plan to deliver the required improvements.

*Review and monitoring*

This group will account monthly to the Patient Experience Steering Group and will commence reporting in June 2012. In addition, this work stream will report to the Quality Income Protection Group, chaired by the Chief Operating Officer, bi-weekly.

Data (survey participation rates and results) will be available real time via the Optimum system. Variation against the participation target and results will be included in CSC performance reports. A monthly report of the 5 key questions will continue to be provided for the Business Intelligence Unit.

## **5. SUMMARY**

The national inpatient survey results have shown an improvement in 9/10 sections over the past three years. There remain however, some areas of concern; the key area being performance against the CQUIN 5 key questions. To ensure a systematic approach to delivering the required improvements a focussed quality improvement plan has been developed and implemented. In addition to increasing the participation rate to improve data reliability, the review and monitoring system has been improved to enable early identification of failure to progress.





## APP I

## National Inpatient Survey – benchmark comparison 2010 – 2011

Number	Question	Trust 2010	Trust 2011	Position	Benchmark
<b>Section 1</b>	<b>The Emergency Department ( (answered by emergency patients only)</b>	<b>7.6</b>	<b>7.7</b>	↔	
Q3	While you were in the ED, how much information about your condition or treatment was given to you?	8.2	8.0	↔	
Q4	Were you given enough privacy when being examined or treated in the ED?	8.5	8.4	↔	
Q5	Following arrival at the hospital, how long did you wait before being admitted to a bed on a ward?	6.3	6.5	↔	
<b>Section 2</b>	<b>Waiting list and planned admissions (answered by those referred to hospital)</b>	<b>6.3</b>	<b>6.1</b>	↔	
Q8	Overall, from the time you first talked to a health professional about being referred to hospital, how long did you wait to be admitted to hospital?	6.2	6.1	↔	
Q9	How do feel about the length of time you were on the waiting list?	8.1	7.6	↓	
Q10	Were you given a choice of admission dates?	1.5	1.3	↔	
Q11	Was your admission date changed by the hospital?	9.3	9.2	↔	
<b>Section 3</b>	<b>Waiting to get a bed on a ward</b>	<b>8.1</b>	<b>8.5</b>	↔	
Q12	From the time you arrived at the hospital, did you feel that you had to wait a long time to get a bed on a ward?	8.1	8.5	↔	
<b>Section 4</b>	<b>The hospital and ward</b>	<b>8.0</b>	<b>8.3</b>	↔	
Q14	Did you ever share a sleeping area with patients of the opposite sex?	8.7	8.6	↔	
Q19	Did you ever use the same bathroom or shower area as patients of the opposite sex?	8.3	8.6	↔	
Q20	Were you ever bothered by noise at night from other patients?	5.9	6.6	↑	
Q21	Were you ever bothered by noise at night from hospital staff?	7.5	7.9	↔	
Q22	In your opinion, how clean was the hospital room or ward that you were in?	8.9	9.1	↔	
Q23	How clean were the toilets and bathrooms you used in hospital?	8.5	8.7	↔	
Q24	Did you feel threatened during your stay in hospital by patients or visitors?	9.8	9.8	↔	
Q25	Did you have somewhere to keep your personal belongings whilst on the ward?	6.8	7.1	↔	
Q26	Did you see any posters or leaflets on the ward asking patients and visitors to wash their hands or to use hand-wash gels?	9.0	9.2	↔	
Q27	Were hand-wash gels available for patients and visitors to use?	9.6	9.7	↔	
Q28	How would you rate the hospital food?	5.0	5.1	↔	
Q29	Were you offered a choice of food?	8.8	8.7	↔	
Q30	Did you get enough help from staff to eat your meals	7.0	7.2	↔	

<b>Section 5</b>	<b>Doctors</b>	<b>8.3</b>	<b>8.5</b>	↔	
Q31	When you had important questions to ask a doctor, did you get answers that you could understand?	8.0	8.1	↔	
Q32	Did you have confidence and trust in the doctors treating you	8.3	8.8	↔	
Q33	Did doctors talk in front of you as if you weren't there?	8.3	8.5	↔	
Q34	As far as you know, did doctors wash or clean their hands between touching patients?	8.5	8.5	↔	
<b>Section 6</b>	<b>Nurses</b>	<b>8.3</b>	<b>8.2</b>	↔	
Q35	When you had important questions to ask a nurse, did you get answers that you could understand?	8.1	7.7	↔	
Q36	Did you have confidence in the nurses treating you?	8.6	8.5	↔	
Q37	Did nurses talk in front of you as if you weren't there?	8.9	8.7	↔	
Q38	In your opinion, were there enough nurses on duty to care for you in hospital?	7.0	7.1	↔	
Q39	As far as you know, did nurses wash or clean their hands between touching patients?	8.7	8.7	↔	
<b>Section 7</b>	<b>Care and treatment</b>	<b>7.4</b>	<b>7.3</b>	↔	
Q40	Did a member of staff say one thing and another say something different?	7.5	7.7	↔	
Q41	Were you involved as much as you wanted in decisions about your care and treatment?	7.1	6.9	↔	
Q42	How much information about your condition or treatment was given to you?	7.8	7.9	↔	
Q43	Did your family or someone close to you have enough opportunity to speak to a doctor?	6.3	6.3	↔	
Q44	Did you find someone on the hospital staff to talk to about your worries and fears?	5.7	5.8	↔	
Q45	Do you feel you got enough emotional support from hospital staff during your stay?	New question	6.9		
Q46	Were you given enough privacy when discussing your condition or treatment?	8.3	8.5	↔	
Q47	Were you given enough privacy when being examined or treated?	9.3	9.4	↔	
Q49	Do you think the hospital staff did everything they could to control your pain?	8.2	8.0	↔	
Q50	After you used the call button, how long did it take before you got help?	6.1	6.8		
<b>Section 8</b>	<b>Operations and procedures (answered by patients who had an operation or procedure)</b>	<b>8.3</b>	<b>8.5</b>	↔	
Q52	Did a member of staff explain the risks and benefits of the operation or procedure?	9.0	9.0	↔	
Q53	Did a member of staff explain what would be done during the operation or procedure?	8.5	8.9	↔	
Q54	Did a member of staff answer your questions about the operation or procedure?	8.6	9.0	↔	
Q55	Were you told how you could expect to feel after you had the operation or procedure?	7.3	7.2	↔	
Q57	Did the anaesthetists or another member of staff explain how he or she would put you to sleep or control your pain?	9.0	8.9	↔	

Q58	Afterwards, did a member of staff explain how the operation or procedure had gone?	7.7	8.0	↔	
<b>Section 9</b>	<b>Leaving hospital</b>	<b>6.3</b>	<b>6.4</b>	↔	
Q59	Did you feel you were involved in decisions about your discharge from hospital?	6.6	6.5	↔	
Q61	Discharge delayed due to wait for medications/see doctor/ wait for an ambulance	NA	6.0		
Q63	How long was the delay?	7.3	7.5	↔	
Q64	Did a member of staff explain the purpose of the medicines you were to take in a way you could understand?	7.8	7.9	↔	
Q65	Did a member of staff tell you about the medication side effects to watch for when you went home?	4.4	4.5	↔	
Q66	Were you told how to take you medication in a way you could understand?	8.0	8.0	↔	
Q67	Were you given clear written or printed information about your medicines?	7.2	7.2	↔	
Q68	Did a member of staff tell you about any danger signals you should watch for after you went home?	4.5	5.1	↑	
Q70	Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?	7.4	7.3	↔	
Q71	Did you receive copies of letters sent between hospital doctors and your family doctor (GP).	3.2	4.2	↔	
Q72	Were the letter written in a way you could understand?	7.5	7.5	↔	
<b>Section 10</b>	<b>Overall views and experiences</b>	<b>5.4</b>	<b>5.6</b>	↔	
Q73	Overall, did you feel you were treated with respect and dignity while you were in the hospital?	8.8	8.7	↔	
Q74	How would you rate how well the doctors and nurses worked together?	7.6	7.5	↔	
Q75	Overall, how would you rate the care you received?	7.5	7.6	↔	
Q76	During your hospital stay, were you ever asked to give your views on the quality of your care?	0.3	0.9	↔	
Q77	While in hospital, did you ever see any posters or leaflets explaining how to complain about the care you received?	3.0	3.5	↔	

Key

Progress	
↑	Improvement of 5 points or more
↔	Remained the same ( + or – 5 points)
↓	Deterioration of 5 points or more
Benchmark	
Better than most	
About the same	
Worse than most	