

EAST KENT HOSPITALS UNIVERSITY NHS FOUNDATION TRUST

REPORT TO:	BOARD OF DIRECTORS - 25 JULY 2014
SUBJECT:	ADULT INPATIENT SURVEY 2013
REPORT FROM:	CHIEF NURSE & DIRECTOR OF QUALITY & OPERATIONS, DEPUTY CHIEF EXECUTIVE
PURPOSE:	Information and Discussion

CONTEXT / REVIEW HISTORY / STAKEHOLDER ENGAGEMENT

This document provides the Board of Directors with an overview of the results of the national in-patient survey for 2013. The paper was presented to the Integrated Audit & Governance committee in June 2014. The paper to the Board of Directors will be supported by a presentation providing specific updates on actions taken.

SUMMARY:

This paper summarises the key points of the CQC Adult Inpatient Survey 2013, which was undertaken between September 2013 and January 2014. The survey involved 156 acute and specialist hospital Trusts in England. The survey sampled 850 patients who had at least one overnight stay during June, July or August 2013. The paper describes the results of this survey given by our patients and makes comparisons with previous years, national averages and our local Trusts in Kent & Medway.

The Survey contains seventy questions within ten categories. There was improvement since 2012 in 4 categories, 3 categories remained the “same”, and there was deterioration in 3 categories; “Waiting list and planned admissions”, “Waiting to get to a bed on a ward”, and “Doctors”.

EKHUFT is performing about the same as the other Trusts in Kent and Medway. For a second year running all Trusts in Kent and Medway scored low in the “Overall views and experiences” category in relation to being asked to give views on quality of care, and understanding how to complain, compared to other questions in the survey (although some improvement in the response to these questions was seen since 2012). The survey results indicate that this was experienced nationally. This is somewhat surprising with the introduction of the Friends & Family test in the last year.

East Kent Hospitals received a “significantly better than average” result for Question 54 - “Before you left hospital, were you given any written or printed information about what you should or should not do after leaving hospital?” and did not receive a “significantly worse than average” result for any question.

Improvements identified in response to the 2012 Inpatient Survey were implemented in 2013/14 and an action plan has been developed to respond to the results of the 2013 Inpatient Survey.

IMPACT ON TRUST'S STRATEGIC OBJECTIVES:

Impacts on SO1 and SO6; Quality and Finance, the Clinical Strategy, Patient Experience, Quality Strategy, "We Care" Programme and Privacy and Dignity Strategy.

FINANCIAL IMPLICATIONS:

CQUINS gateway relating to patient experience achieved.

LEGAL IMPLICATIONS / IMPACT ON THE PUBLIC SECTOR EQUALITY DUTY:

None identified.

PROFESSIONAL ADVICE TAKEN ON ANY NOVEL OR CONTENTIOUS ISSUES:

Not applicable.

IAGC / Board of Directors / CPMT ACTION REQUIRED:

- (a) to note the report
- (b) to discuss and determine actions as appropriate

CONSEQUENCES OF NOT TAKING ACTION:

Failure to make the desired level of improvement in patient satisfaction in line with Quality Strategy.

Summary of results of Care Quality Commission (CQC) Adult Inpatient Survey 2013

1. Introduction

- 1.1. This paper summarises the key points of the CQC Adult Inpatient Survey 2013, which was undertaken between September 2013 and January 2014. The survey involved 156 acute and specialist hospital Trusts in England.
- 1.2. The survey sampled 850 patients who had at least one overnight stay during June, July or August 2013.
- 1.3. The questions posed in some categories have changed over time, making direct data comparisons and assessment of performance difficult.

2. Background

- 2.1. All NHS Trusts in England are required to participate in the annual adult inpatient survey, which is led by the CQC. The survey provides us with an opportunity to review our progress in meeting the expectations of our patients who come into hospital. The inpatient survey results are collated and contribute to the CQC's assessment of our performance against the essential standards for quality and safety.
- 2.2. The survey asks 70 questions in the following categories:
 - 2.2.1. The Emergency department
 - 2.2.2. Waiting list and planned admissions
 - 2.2.3. Waiting to get a bed on a ward
 - 2.2.4. The hospital and ward
 - 2.2.5. Doctors
 - 2.2.6. Nurses
 - 2.2.7. Care and treatment
 - 2.2.8. Operations and procedures
 - 2.2.9. Leaving hospital
 - 2.2.10. Overall views and experiences.

3. Survey statistics for East Kent Hospitals University NHS Foundation Trust

- 3.1. 405 patients completed a questionnaire giving a response rate of 50 per cent (total was 809 after 41 patients were excluded due to being ineligible, having moved or deceased.) The national target was a 60% response rate.
- 3.2. More women than men completed the survey, (52 per cent in comparison with 48 per cent).
- 3.3. Patients aged 66 and over made up the largest group of those who responded (64 per cent).
- 3.4. Further information on the demographics of the respondents can be found in Appendix 3 of this document.

4. Survey Methodology

- 4.1. For each question in the survey, the individual responses were converted into scores on a scale of 0 to 10. A score of 10 represents the best possible response. Therefore, the higher the score for each question, the better the Trust is performing. These have been translated to out of 100 to compare to previous year's results.
- 4.2. Although some of the questions included in the Survey were worded slightly differently than in previous years, no additional questions were added, and no previous questions removed. Full details of amended wordings can be found in <http://www.nhssurveys.org/surveys/714>.

5. Summary of our results

- 5.1. Each category of questions was given an overall score and EKHUFT performed as follows:

Question	2012 (%)	2013 (%)	% improvement/deterioration	2013 National Comparison
The Emergency/ A&E Dept (<i>answered by emergency patients only</i>)	84	84	Same	About the same
Waiting list and planned admissions (<i>answered by those referred to hospital</i>)	91	85	6% deterioration	About the same
Waiting to get to a bed on a ward	80	77	3% deterioration	About the same
The hospital and ward	80	80	Same	About the same
Doctors	85	84	1% deterioration	About the same
Nurses	83	83	Same	About the same
Care and treatment	76	77	1% improvement	About the same
Operations and procedures (<i>answered by patients who had an operation or procedure</i>)	84	85	1% improvement	About the same
Leaving hospital	73	76	3% improvement	About the same
Overall views and experiences	49	56	7% improvement	About the same

- 5.2. There was improvement since 2012 in 4 categories, 3 categories remained the "same", and there was deterioration in 3 categories. These were:

- Waiting list and planned admissions;
- Waiting to get to a bed on a ward;
- Doctors.

5.3. Top 10 areas of improved results since the 2012 Survey

Questions	2012	2013
Did you ever use the same bathroom or shower area as patients of the opposite sex?	83	77
How would you rate the hospital food?	51	59
Were you offered a choice of food?	85	91
Were you given any written information about what you should do after leaving hospital?	70	83
Did a member of staff tell you about medication side effects to watch for?	53	61
Did a member of staff tell you about any danger signals you should watch for?	53	61
Did hospital staff take your family or home situation into account when planning your discharge?	70	77
Did hospital staff give your family or someone close to you all the information they needed?	57	66
While in hospital, were you ever asked to give your views on the quality of your care?	10	26
Did you see any posters or leaflets explaining how to complain about the care you received?	18	30

5.4. Areas where results deteriorated most since the 2012 Survey

Questions	2012	2013
How do you feel about the length of time you were on the waiting list?	84	76
Had the hospital specialist been given all necessary information about your condition/illness from the person who referred you?	98	84
Discharge not delayed more than 4 hours?	81	73
Did you receive copies of letters sent between hospital doctors and your family doctor?	74	68

Full results for 2013 and for each year back to 2007 can be found in Appendix 1 of this paper.

6. How we compare with other organisations in Kent and Medway

6.1. The table below demonstrates how we compare with other Trusts in Kent and Medway:-

Question Category	East Kent Hospitals University Foundation Trust (%)	Maidstone & Tunbridge Wells NHS Trust (%)	Medway NHS Foundation Trust (%)	Dartford & Gravesham NHS Trust (%)
The Emergency/ A&E Dept (<i>answered by emergency patients only</i>)	84	85	78	80
Waiting list and planned admissions (<i>answered by those referred to hospital</i>)	85	90	87	86
Waiting to get to a bed on a ward	77	76	61	66
The hospital and ward	80	83	76	78
Doctors	84	86	82	83
Nurses	83	84	78	80
Care and treatment	77	79	71	74
Operations and procedures (<i>answered by patients who had an operation or procedure</i>)	85	82	82	83
Leaving hospital	76	76	66	71
Overall views and experiences	56	53	49	50

6.2. EKHUFT is performing about the same as the other Trusts in Kent and Medway. For a second year running all Trusts in Kent and Medway scored low in the “Overall views and experiences” category in relation to being asked to give views on quality of care, and understanding how to complain, compared to other questions in the survey (although some improvement in the response to these questions was seen since 2012). The survey results indicate that this was experienced nationally. This is despite the introduction of the Friends & Family test in the last year which actively encourages feedback.

7. How the Kent and Medway Trusts compare nationally

7.1. The CQC strongly advise against identifying which Trusts had the lowest and highest score for each question, stressing the need to take into account the statistical significance of differing patient groups surveyed.

7.2. However, the Trusts which fall into “significantly better than average” or “significantly worse than average” for each question have been published. East Kent Hospitals received a “significantly better than average” result for Question 54 - “Before you left hospital, were you given any written or printed information about what you should or should not do after leaving hospital?” and did not receive a “significantly worse than average” result for any question.

7.3. Results of where a Kent & Medway Trust fell within the “significantly better than average” or “significantly worse than average” group is in Appendix 2 of this report.

8. Improvements

8.1. In response to the Inpatient Survey 2012, the following improvements were implemented:-

Improvements planned for 2013/14	Action taken
1. Implementation of a Friends & Family Test to A&E, Inpatient Areas and Maternity	We introduced the Friends and Family Test in April 2013 for inpatients and A&E attenders. In October 2013 we introduced the Maternity Friends and Family Test.
2. Reporting via the Ward Quality Dashboard the results of the Patient Friends & Family Test, regular inpatient survey results (via the Meridian system) and the number of complaints, to pro actively identify areas of concern;	The Friends & Family Test results are published to all participating areas on a monthly basis. Complaints information is also provided to each Division. Information on both the Friends & Family Test and Complaints are reported monthly via the Clinical Quality & Patient Safety Board Report.
3. Reviewing the literature available to patients on “How to Complain”;	The information available on how to complain has improved, leading to an improved result in this year’s survey of 30 against a score of only 18 in 2012.
4. Launching the second year of the “We Care” Programme.	<p>The “We Care” programme has continued to move forward throughout 2013/14. After listening to over 1500 patients and members of staff three new Trust values and behaviour standards have been developed. They describe how the Trust employees aim to interact with patients, family members and each other. These values and standards also outline the Trust's ambition to "show that we care" and to provide an excellent experience for everyone who works within the Trust. The values and standards are listed below. Each of these will be evidenced through a more detailed description of the behaviours that staff and patients want to see.</p> <ul style="list-style-type: none"> • CARING: People will feel cared for as individuals. Because we are welcoming and polite; attentive and helpful; we respect people, their dignity and their time, and we have the courage to speak up when others don't. • SAFE: People will feel safe, reassured and involved. Because we are consistently safe and reassuringly professional, we listen and communicate clearly, and we work as an effective team. • MAKING A DIFFERENCE: People will feel confident we are making a difference.

9. Recommendations

9.1. In response to the 2013 Adult Inpatient Survey the key areas for our priorities for improvement during 2014/15 will be to:

Issue to be addressed	Action to be taken
1. Waiting list times	<ul style="list-style-type: none"> • Optimise the use of day case surgery • Reduce the number of cancellations on the day of surgery
2. Hospital Specialist having all necessary information about the patient's condition/illness from the person who referred them	<ul style="list-style-type: none"> • We are working with our CCG colleagues as part of the CQUIN programme to develop ways we can share information across agencies.
3. Sharing correspondence sent to the GP with the patient	<ul style="list-style-type: none"> • Use of eDN (electronic Discharge Notification) to share correspondence with the patient's GP
4. Waiting times on arrival before being given a bed	<ul style="list-style-type: none"> • Improve Emergency Department Admissions process • Review processes to improve delays in the discharge of patients
5. Improved Hospital food	<ul style="list-style-type: none"> • Continue to regularly review the food service, menus and mealtime experience • Include patient and public involvement in the decision making processes for improvements • Continue to work with SERCO to meet the needs of those who have difficulties communicating or reading from the menu
6. Help at mealtimes	<ul style="list-style-type: none"> • Review of role and education and training of mealtime volunteers. • Develop a programme for staff who wish to help assist patients at mealtimes during their working day (Mealtime companions) • Strengthen the role of the Housekeeper as a member of the ward team • Review of mealtime procedures and assistance provided.
7. Hospital staff being available to talk to about worries and fears	<p>The Matrons and Ward Managers are working together to provide clear signposting to patients and visitors in the clinical areas as to who the person may contact should they have a concern. Boards are in place in some wards and will be developed in other areas displaying who the staff are, their role and their contact details should someone have a concern. This is being developed and evaluated via the peer review process and discussed at the Matron's Forum. In addition PALs is being re-instated on each of the</p>

Issue to be addressed	Action to be taken
	three main sites, led by the Patient Experience Team.
8. Responses to call buttons	This is being addressed as part of the peer review process and local action plans. It forms a component of the 'Comfort' rounds that wards carry out on a regular basis. The Friends and Family Test enable us to evaluate how well we respond to patients' needs.
9. Discharge process:- - within 4 hours - being informed about medication side effects - informing patients about any danger signals - giving family or someone close all the information they needed	Review processes to improve delays in the discharge of patients.
10. Opportunity to provide views on care received	The Friends and Family Test will continue to be available in all inpatient wards for patients to have the opportunity to provide feedback. PALs will be more accessible and visible on each of our three main sites during this year.
11. Complaints process on care received clearly published	Action plan in place to develop this as part of the Complaints Management Steering Group.

Paper compiled by Sarah Scott
Programme manager

Appendix 1 – East Kent Hospitals Inpatient Survey Results – CQC

Questions	2007	2008	2009	2010	2011	2012	2013
Admission to Hospital							
1. How much information about your condition did you get in the A&E Department?	76	83	77	79	81	83	82
2. Were you given enough privacy when being examined or treated in the A&E Department?	82	83	82	83	84	85	85
3. How long did you wait from arriving at A&E to be admitted to a bed on a ward?	54	54	61	53	NA	NA	NA
4. Were you offered a choice of hospital for your first hospital appointment?	29	39	NA	NA	NA	NA	NA
5. Overall, how long did you wait from being referred to hospital to being admitted?	42	55	64	61	61	NA	NA
6. How do you feel about the length of time you were on the waiting list? (waited the right amount of time)	68	85	86	84	84	84	76
7. Were you given a choice of admission dates?	20	23	23	18	24	NA	NA
8. Was your admission date changed by the hospital?	92	93	94	92	95	93	94
9. Had the hospital specialist been given all necessary information about your condition/illness from the person who referred you?	NA	NA	NA	NA	NA	98	84
10. Upon arrival, did you feel that you had to wait a long time to get to a bed on a ward?	79	78	84	76	79	80	77

Questions	2007	2008	2009	2010	2011	2012	2013
The Hospital and Ward							
1. Did you ever share a sleeping area with patients of the opposite sex?	72	80	90	85	95	92	93
2. Did you ever use the same bathroom or shower area as patients of the opposite sex?	68	73	76	79	75	83	77
3. Were you ever bothered by noise at night from other patients?	55	58	60	55	58	59	58
4. Were you ever bothered by noise at night from hospital staff?	81	77	77	79	83	79	78
5. In your opinion, how clean was the hospital room or ward that you were in?	80	82	85	84	85	87	86
6. How clean were the toilets and bathrooms that you used in the hospital?	77	77	80	81	81	81	81
7. Did you feel threatened during your stay in hospital by other patients or visitors?	95	98	97	97	98	97	96
8. Did you have somewhere to keep your personal belongings whilst on the ward?	58	61	61	60	64	NA	NA
9. Did you see any posters or leaflets on the ward asking patients and visitors to wash their hands or to use hand-wash gels?	N/A	N/A	97	96	95	NA	NA
10. Were hand-wash gels available for patients and visitors to use?	N/A	N/A	97	97	96	97	97
11. How would you rate the hospital food?	47	50	46	47	47	51	59
12. Were you offered a choice of food?	85	82	82	83	83	85	91
13. Did you get enough help from staff to eat your meals?	64	75	70	69	69	72	68

Doctors	2007	2008	2009	2010	2011	2012	2013
1. When you had important questions to ask a doctor, did you get answers that you could understand?	80	80	79	79	78	81	80
2. Did you have confidence and trust in the doctors treating you?	87	88	88	86	87	88	88
3. Did doctors talk in front of you as if you weren't there?	83	85	82	83	84	86	84
4. As far as you know, did doctors wash or clean their hands between touching patients?	77	79	83	83	81	NA	NA

Nurses	2007	2008	2009	2010	2011	2012	2013
1. When you had important questions to ask a nurse, did you get answers that you could understand?	82	82	82	80	80	85	84
2. Did you have confidence and trust in the nurses treating you?	86	86	87	84	86	87	88
3. Did nurses talk in front of you as if you weren't there?	89	90	88	88	89	90	89
4. In your opinion, were there enough nurses on duty to care for you in hospital?	64	70	74	71	74	72	70
5. As far as you know, did nurses wash or clean their hands between touching patients?	84	85	89	88	86	NA	NA

Your Care and Treatment	2007	2008	2009	2010	2011	2012	2013
1. Did a member of staff say one thing and another say something different?	79	79	80	77	79	81	79
2. Were you involved as much as you wanted to be in decisions about your care?	69	71	68	69	71	74	73
3. How much information about your condition or treatment was given to you?	73	78	77	74	77	79	80
4. Did your family or someone close to you have enough opportunity to talk to a doctor?	60	61	67	57	62	NA	NA
5. Did you find someone on the hospital staff to talk to about your worries and fears?	58	54	57	57	58	58	60
6. Do you feel you got enough emotional support from hospital staff during your stay?	NA	NA	NA	NA	68	69	72
7. Were you given enough privacy when discussing your condition or treatment?	79	82	80	81	79	85	87
8. Were you given enough privacy when being examined or treated?	92	92	93	93	92	94	96
9. Do you think the hospital staff did everything they could to help control your pain?	80	91	78	81	81	80	82
10. After you used the call button, how long did it usually take before you got help?	58	64	62	62	63	62	60

Operations & Procedures	2007	2008	2009	2010	2011	2012	2013
1. Did a member of staff explain the risks and benefits of the operation or procedure?	87	93	90	90	85	91	90
2. Did a member of staff explain what would be done during the operation or procedure?	82	88	87	87	84	87	87
3. Did a member of staff answer your questions about the operation or procedure?	84	91	88	89	85	88	89
4. Were you told how you could expect to feel after you had the operation or procedure?	66	73	74	69	69	72	72
5. Did the anaesthetist explain how he or she would put you to sleep or control your pain?	88	91	93	93	89	89	93
6. Afterwards, did a member of staff explain how the operation or procedure had gone?	77	80	78	75	76	80	82

Leaving Hospital	2007	2008	2009	2010	2011	2012	2013
1. Did you feel you were involved in decisions about your discharge from hospital?	64	70	69	68	66	69	71
2. Were you given enough notice about when you were going to be discharged?	NA	NA	NA	NA	NA	71	73
3. Discharge delayed due to wait for medicines/to see doctor/for ambulance	NA	NA	NA	NA	63	71	NA
4. What was the main reason for the delay?	68	71	69	62	NA	NA	NA
5. Discharge not delayed more than 4 hours?	81	83	81	75	76	81	73
6. Were you given any written information about what you should do after leaving hospital?	52	61	61	67	68	70	83
7. Did hospital staff explain the purpose of the medicines you were to take home?	80	85	85	87	81	83	86
8. Did a member of staff tell you about medication side effects to watch for?	44	46	49	46.3	45	46	55
9. Were you told how to take your medication in a way you could understand?	78	83	87	86	83	83	87
10. Were you given clear written information about your medicines?	70	71	74	76	75	79	83
11. Did a member of staff tell you about any danger signals you should watch for?	46	51	52	51	50	53	61
12. Did hospital staff take your family or home situation into account when planning your discharge?	NA	NA	NA	NA	NA	70	77
13. Did hospital staff give your family or someone close to you all the information they needed?	48	55	56	53	56	57	66
14. Did hospital staff tell you who to contact if you were worried about your condition?	72	75	74	78	75	80	80
15. Did hospital staff discuss with you whether additional equipment or adaptations were needed in your home?	NA	NA	NA	NA	NA	86	86
16. Did hospital staff discuss with you whether you may need any further health or social care services after leaving hospital?	NA	NA	NA	NA	NA	84	87
17 Did you receive copies of letters sent between hospital doctors and your family doctor?	49	54	47	62	64	74	68
18 Were the letters written in a way that you could understand?	N/A	N/A	81	85	85	85	85

Overall	2007	2008	2009	2010	2011	2012	2013
1. Did you feel you were treated with respect and dignity while you were in the hospital?	86	86	87	88	88	89	89
2. How would you rate how well the doctors and nurses worked together?	75	75	75	74	77	NA	NA
3. Overall, how would you rate the care you received?	77	76	75	75	76	79	79
4. While in hospital, were you ever asked to give your views on the quality of your care?	3	3	14	13	10	10	26
5. Did you see any posters or leaflets explaining how to complain about the care you received?	29	32	40	35	34	18	30
6. Did you want to complain about the care you received in hospital?	13	91	93	89	NA	NA	NA

Red bold text indicates deterioration in result since the 2012 Survey results

Green bold text shows key areas of most improvement in results since the 2012 Survey results

Appendix 2 - How the Kent and Medway Trusts compare nationally

Trust	Number of questions with results “significantly better than average”	Number of questions with results “significantly worse than average”
Dartford & Gravesham NHS Trust	0	3
East Kent Hospitals University Foundation Trust	1 <i>(Question 54 -“Before you left hospital, were you given any written or printed information about what you should or should not do after leaving hospital?”)</i>	0
Maidstone & Tunbridge Wells NHS Trust	5	0
Medway NHS Foundation Trust	0	21

Appendix 3 – Background Information
2013

Number of Respondents:	405	Age Group %	16-35
4%			
Response Rate%	50%		36-50
9%			
Gender:			51-65
24%			
Male:	48%		66 and
over	64%		
Female:	52%		

Ethnic Group%

White	93%	
Mixed	0	
Asian or Asian British	0	
Black or Black British	0	
Chinese or other ethnic group		0
Not known	7	