

<b>Report to:</b>	Trust Board (Public)	<b>Agenda item:</b>	<b>SFT 4085</b>
<b>Date of Meeting:</b>	02 August 2018		

<b>Report Title:</b>	National Inpatient Survey 2017 Analysis of the Care Quality Commission (CQC) Benchmark Report and Local Action Plans			
<b>Status:</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
			<b>X</b>	
<b>Prepared by:</b>	Hazel Hardyman, Head of Customer Care Gill Sheppard, Clinical Governance Administrator			
<b>Executive Sponsor (presenting):</b>	Miss Lorna Wilkinson, Director of Nursing			
<b>Appendices (list if applicable):</b>	Non-applicable			

<b>Recommendation:</b>
<p>Recommendation: Board members are invited to endorse this approach and note the contents of this report.</p> <p>Assurance: The results of the national inpatient survey 2017 for Salisbury District Hospital are in line with the picture across most other Trusts in England. Action plans are in place to make improvements wherever possible.</p>

<b>Executive Summary:</b>
<p><b><u>Analysis of the CQC Benchmark Report</u></b></p> <ul style="list-style-type: none"> <li>• SFT scored 'about the same' as most other Trusts in all 11 sections of the survey.</li> <li>• SFT scored 'better' than most other Trust in 1 of the 62 individual questions:-             <ul style="list-style-type: none"> <li>○ If patients had to move wards at night, the reasons for doing so were explained. (SFT 7.9; national average 7.1)</li> </ul> </li> <li>• When compared with its own 2016 benchmark results, SFT showed a statistically significant increase in scores in two areas:-             <ul style="list-style-type: none"> <li>○ Admission dates not being changed by the hospital. (+0.3)</li> <li>○ Patients not having to wait a long time to get to a bed on a ward. (+0.8)</li> </ul> </li> <li>• SFT showed a statistically significant decrease in six areas:-             <ul style="list-style-type: none"> <li>○ Privacy when being examined or treated in ED. (-0.3)</li> <li>○ Noise from other patients at night. (-0.5)</li> <li>○ Doctors clearly answering patients' questions. (-0.5)</li> <li>○ Patients having confidence and trust in the doctors treating them. (-0.4)</li> <li>○ Doctors talking in front of patients as if they were not there. (-0.3)</li> <li>○ Patients being told about medication side effects to watch for after discharge. (-0.7)</li> </ul> </li> <li>• A statistically significant difference means that the change in the results is very unlikely to have occurred by chance.</li> </ul>

Salisbury's results can be viewed at [http://nhssurveys.org/Filestore/IP17\\_BMK\\_Reports/IP17\\_RNZ.pdf](http://nhssurveys.org/Filestore/IP17_BMK_Reports/IP17_RNZ.pdf)

**CQC Website**

The results have been published on the Care Quality Commission's website. They show that Salisbury scored 'about the same' as most other Trusts in England for the 11 sections. For the individual questions, it scored 'better' for staff explaining the reason for patients needing to change wards at night.

The results can be viewed at <http://www.cqc.org.uk/provider/RNZ/survey/3#undefined>.

**Local Results Analysis and the Next Steps**

Respondents made 449 comments on things they felt were good about their stay and 351 comments on areas they felt could be improved. The top three areas where there were more positive than negative comments were staff in general, doctors and nurses. The three areas where there were more negative than positive comments were discharge, medicines and noise.

Themes arising from feedback received through the national patient survey, real-time feedback, Friends and Family Test, concerns and complaints have been considered by individual wards and action plans have been updated accordingly.

Real-time feedback questionnaires for 2018/19 have been adjusted to gather more detailed information where required. This information will subsequently feed into ward action plans.

**Comparisons with Neighbouring Trusts**

Salisbury's scores were fairly evenly matched across all areas. Further details are provided in the report (Section 3.6).

**Comparisons with the National Picture**

The CQC noted that nationally, the majority of inpatients were happy with their care, had confidence in the doctors and nurses treating them and had a 'better' overall experience. However, survey respondents were less positive about arrangements and information received when leaving hospital, and those with a mental health condition reported a poorer than average experience across most question areas.

This was also reflected in Salisbury's results.

**Summary**

The results of the national inpatient survey 2017 for Salisbury District Hospital are in line with the picture across most other Trusts in England. Action plans are in place to make improvements wherever possible.

Board Assurance Framework – Strategic Priorities	Select as applicable
<b>Local Services</b> - We will meet the needs of the local population by developing new ways of working which always put patients at the centre of all that we do	<input checked="" type="checkbox"/>
<b>Specialist Services</b> - We will provide innovative, high quality specialist care delivering outstanding outcomes for a wider population	<input type="checkbox"/>
<b>Innovation</b> - We will promote new and better ways of working, always looking to achieve excellence and sustainability in how our services are delivered	<input type="checkbox"/>
<b>Care</b> - We will treat our patients, and their families, with care, kindness and compassion and keep them safe from avoidable harm	<input checked="" type="checkbox"/>
<b>People</b> - We will make SFT a place to work where staff feel valued and are able to develop as individuals and as teams	<input type="checkbox"/>
<b>Resources</b> - We will make best use of our resources to achieve a financially sustainable future, securing the best outcomes within the available resources	<input type="checkbox"/>

## 1 PURPOSE

- 1.1 This report sets out the results of the national inpatient survey 2017 for Salisbury NHS Foundation Trust (SFT) and local actions.

## 2 BACKGROUND

- 2.1 Salisbury NHS Foundation Trust participated in the 15th national inpatient survey between September 2017 and January 2018. Questionnaires were sent to 1,250 patients who had stayed at Salisbury District Hospital for at least one night during the months of June or July 2017.

## 3 REPORT AND ANALYSIS

### 3.1 The CQC Benchmark Report

- 3.1.1 The Care Quality Commission (CQC) have produced a report for each acute Trust in England showing the results weighted against all other Trusts who participated in the survey. Weighting is applied in three specific areas:-

- a) a high percentage of responses from older people who tend to report more positive experiences than younger respondents;
- b) a high percentage of women respondents who tend to report less positive experiences than men;
- c) a high percentage of respondents from emergency admissions who tend to be more negative than those respondents who had a planned admission.

A scoring system is used which marks each question out of a maximum of 10 points.

Salisbury's results can be viewed

at [http://nhssurveys.org/Filestore/IP17\\_BMK\\_Reports/IP17\\_RNZ.pdf](http://nhssurveys.org/Filestore/IP17_BMK_Reports/IP17_RNZ.pdf)

- 3.1.2 In the report, the word 'better' or 'worse' is displayed if a Trust's score is significantly better or worse than other Trusts, as shown in Example 1 below.

#### Example 1



- 3.1.3 The tables at the back of the report show SFT's score compared to the lowest and highest score across all Trusts, and the number of SFT respondents for that question. The tables also indicate with an arrow whether a Trust's score is significantly up or down on the previous year, as shown in Example 2 below. A statistically significant difference means that the change in the results is very unlikely to have occurred by chance.

Example 2

**Survey of adult inpatients 2017  
Salisbury NHS Foundation Trust**

	Scores for this NHS trust	Lowest trust score in England	Highest trust score in England	Number of respondents (this trust)	2016 scores for this NHS trust	Change from 2016
Q7 Was your admission date changed by the hospital?	9.2	8.1	9.9	283	8.9	↑

3.1.4 The CQC expects Trusts to use the report to understand their own performance and to identify areas for improvement.

**3.2 Analysis of the CQC Benchmark Report**

3.2.1 The survey contained 62 core questions which could be analysed. Other questions (known as filters) instructed respondents to skip certain questions or sections that did not apply to them.

3.2.2 The results are grouped into 11 sections and Trusts are scored for their overall performance in each section.

3.2.3 SFT scored 'about the same' as most other Trusts in all 11 sections:

Section	SFT score	National average score
The Emergency/A&E Department	8.7	8.4
Waiting list and planned admissions	8.5	9.0
Waiting to get to a bed on a ward	8.4	7.8
The hospital and ward	8.0	8.1
Doctors	8.7	8.8
Nurses	8.0	8.2
Care and treatment	8.2	8.3
Operations and procedures	8.3	8.3
Leaving hospital	7.2	7.4
Overall views of care and services	4.3	4.9
Overall experience	8.2	8.4

3.2.4 SFT scored 'better' than most other Trusts in 1 of the 62 individual questions:-

Question	SFT score	National average score
Did the hospital staff explain the reasons for being moved in a way you could understand? [changing wards at night]	7.9	7.1

3.2.5 When compared with its own 2016 benchmark results, SFT showed a statistically significant increase in scores in two areas:-

Question	SFT 2017 score	SFT 2016 score	Difference
Was your admission date changed by the hospital?	9.2	8.9	0.3
From the time you arrived at the hospital, did you feel that you had to wait a long time to get to a bed on a ward?	8.4	7.6	0.8

3.2.6 SFT showed a statistically significant decrease in six areas:-

Question	SFT 2017 score	SFT 2016 score	Difference
Were you given enough privacy when being examined or treated in the A&E Department?	8.8	9.1	-0.3
Were you bothered by noise at night from other patients?	5.5	6.0	-0.5
When you had important questions to ask a doctor, did you get answers that you could understand?	8.2	8.7	-0.5
Did you have confidence and trust in the doctors treating you?	9.0	9.4	-0.4
Did doctors talk in front of you as if you weren't there?	8.7	9.0	-0.3
Did a member of staff tell you about medication side effects to watch for when you went home?	4.8	5.5	-0.7

### 3.3 Comparisons with Demographic Characteristics

3.3.1 The split between male and female respondents was 47% male and 53% female, the same as nationally. Age group, religion and sexual orientation responses were in line with the national figures. SFT's ethnicity responses for the White Group were 94% compared with 90% nationally; responses from other ethnic groups were 1% compared to 5% nationally.

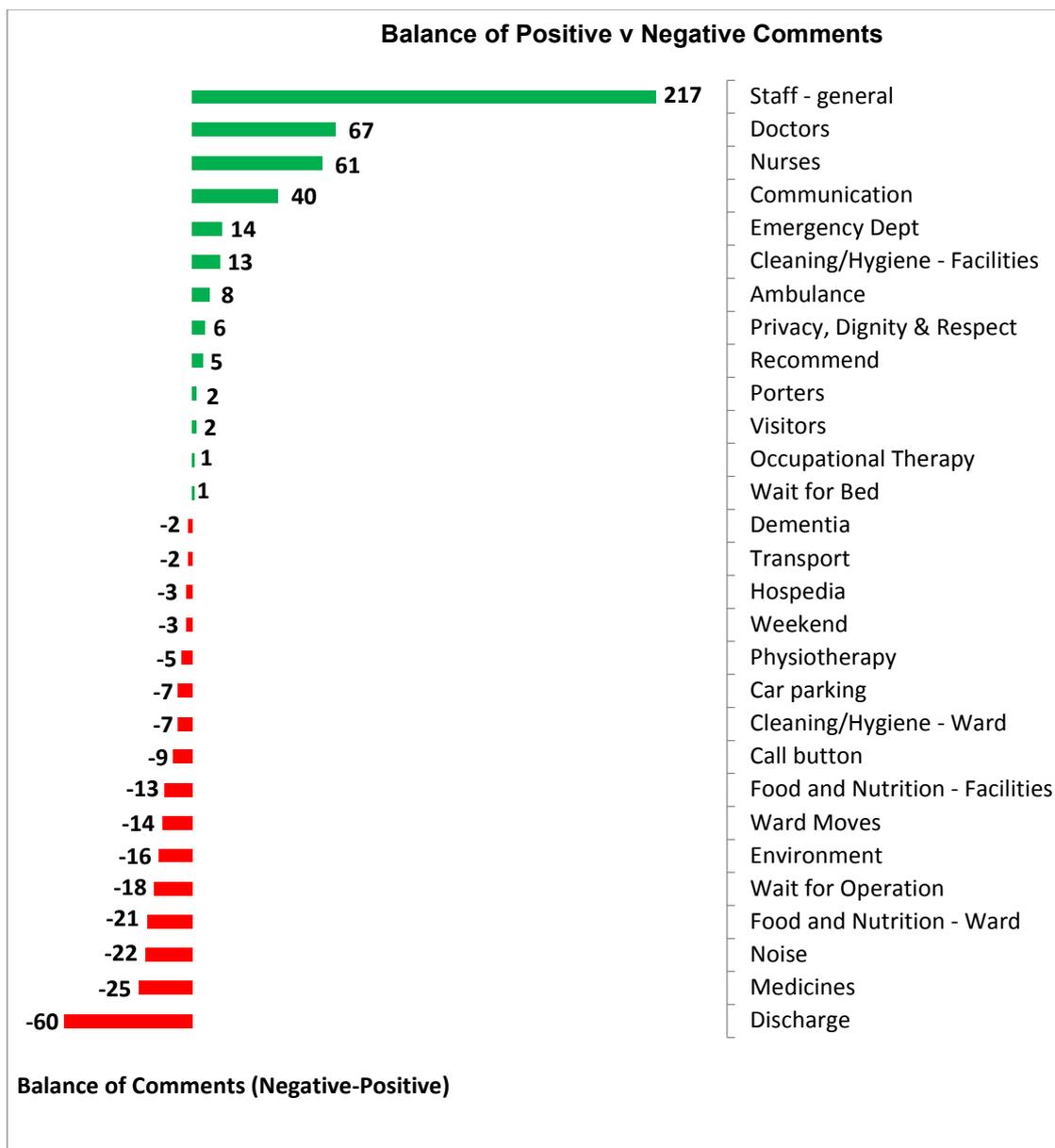
### 3.4 Care Quality Commission Website

3.4.1 The results have been published on the Care Quality Commission's website. They show that Salisbury scored 'about the same' as most other Trusts in England for the

11 sections. For the individual questions, it scored 'better' for staff explaining the reason for patients needing to change wards at night. The results can be viewed at <http://www.cqc.org.uk/provider/RNZ/survey/3#undefined>.

### 3.5 Local Results Analysis and the Next Steps

3.5.1 In addition to the standard questions, patients were invited to make comments about anything which they felt was particularly good about their care or things that they felt could be improved. A total of 449 comments were received regarding things that were good about the patients' stay and 351 comments on things that they felt could be improved. These have been categorised and analysed to show the areas where further attention is required, as indicated in the graph below:



3.5.2 The Patient Experience Analysis Group met in February 2018 to look at the results in conjunction with themes arising from incidents, concerns and complaints. The questionnaires for real-time feedback 2018/19 have been adjusted to reflect concerns raised and to gather more detailed information where required.

3.5.3 In addition, wards continue to review their action plans taking into account themes arising from feedback received through the national patient survey, real-time feedback, Friends and Family Test, concerns and complaints. Completed actions are removed and new ones added. This work continues on a six-monthly rolling programme.

### **3.6 Comparisons with Neighbouring Trusts**

3.6.1 Work has been undertaken to compare this Trust's results with those of other Trusts in the area. The scores were fairly evenly matched across all areas.

3.6.2 Salisbury had the highest or joint highest score in 3 of the 62 individual questions:-

- Did the hospital staff explain the reasons for being moved [at night] in a way you could understand?
- Were you ever bothered by noise at night from hospital staff?
- Were you given enough privacy when being examined or treated?

3.6.3 Salisbury had the lowest or joint lowest score in 2 of the 11 overall sections and 11 of the 62 individual questions:-

#### Overall

- Waiting list and planned admissions
- Nurses

#### Individual

- How do you feel about the length of time you were on the waiting list?
- Were you ever bothered by noise at night from other patients?
- Did you get enough help from staff to wash or keep yourself clean?
- During your time in hospital, did you get enough to drink?
- Did doctors talk in front of you as if you weren't there?
- Did you have confidence and trust in the nurses treating you?
- Did you have confidence and trust in any other clinical staff treating you?
- Were you involved as much as you wanted to be in decisions about your care and treatment?
- If you needed attention, were you able to get a member of staff to help you within a reasonable time?
- Did you feel you were involved in decisions about your discharge from hospital?
- Did hospital staff take your family or home situation into account when planning your discharge?

### **3.7 Comparisons with the National Picture**

3.7.1 The CQC noted that nationally, the majority of people who stayed as an inpatient in hospital were happy with the care they received, had confidence in the doctors and nurses treating them and had a better overall experience. However, survey respondents were less positive about arrangements and information received when

leaving hospital, and those with a mental health condition reported a poorer than average experience across most question areas. This was also reflected in Salisbury's results.

#### **4 SUMMARY**

- 4.1 The results of the national inpatient survey 2017 for Salisbury District Hospital are in line with the picture across most other Trusts in England. Action plans are in place to make improvements wherever possible.

#### **5 RECOMMENDATION**

- 5.1 Board members are invited to endorse this approach and note the contents of this report.

**Hazel Hardyman**  
Head of Customer Care

**Gill Sheppard**  
Clinical Governance Administrator