# THE DEVELOPMENT REPORT FOR THE NHS ADULT INPATIENT SURVEY 2013

Date published: 11<sup>th</sup> September 2013



#### **Contacts**

The Co-ordination Centre for the NHS Survey Programme
Picker Institute Europe
Buxton Court
3 West Way
Oxford
OX2 0JB

Tel: 01865 208127 Fax: 01865 208101

E-mail: <a href="mailto:acute.data@pickereurope.ac.uk">acute.data@pickereurope.ac.uk</a>

Website: www.nhssurveys.org

#### Key personnel

Chris Graham (Director)

Esther Ainley
Kelsey Flott
Caroline Killpack
Jenny King
Katherine Körner
Sheena MacCormick
Nick Pothecary
Mark Waters

## Contents

1	Intro	duction	2
2	Ame	ndments to the core questionnaire	3
	2.1	Changes to the wording of core questions	3
3	Addi	tional changes for the 2013 inpatient survey	6
	3.1	Additional sample data required	6
	3.2	Sample data no longer required	6

# 1 Introduction

National surveys of adult inpatients have been carried out in all acute trusts<sup>1</sup> in England in 2002, and annually since 2004. The average response rate to the 2012 survey was 51%. In 2013 the survey will be conducted again as part of the NHS Patient Survey Programme. The survey will give acute trusts information on inpatient care to facilitate targeted quality improvement. The data will also be used to inform the Caring Domain in the Care Quality Commission's new surveillance model and may also be used for other forms of assessment. NHS England will use the results to understand patients' experiences of NHS services and to drive improvements to them. The Department of Health may use the results to generate aggregate indicators at local, regional and national level, as well as for other publications. These indicators form part of the range of Outcome Frameworks that will be used to hold the NHS Commissioning Board to account for improvements in health outcomes.

As in previous surveys, all trusts will be required to include a set of 'core' questions in their questionnaire and will also have the option of supplementing this with additional items from a bank of validated questions. The methodological approach remains unchanged from prior surveys.

Each year minor adjustments are made to the questionnaire in order to fulfil different strategic requirements as well as part of a process of continual improvement. Minor changes may also be made to other survey documentation. This document provides a record of all changes that have been made to the 2012 survey documents in preparation for the 2013 inpatient survey.

-

<sup>&</sup>lt;sup>1</sup> Those trusts that only treat children (Alder Hey Children's NHS Foundation Trust, Birmingham Children's Hospital NHS Foundation Trust, Great Ormond Street Hospital NHS Trust and Sheffield Children's NHS Trust) were not eligible for participation. Moorfields Eye Hospital NHS Foundation Trust has not participated in recent years as they treat too small a number of inpatients to make up an inpatient sample.

# 2 Amendments to the core questionnaire

#### 2.1 Changes to the wording of core questions

Modifications have been made to the following core questions previously included in the 2012 core questionnaire. Details are provided below. Questions are numbered according to the 2012 and 2013 core questionnaires. All amended questions have been cognitively tested with recent inpatients.

### The accident and emergency department

During cognitive interviewing, three respondents had slight difficulties with question 2, "When you arrived at the hospital, did you go to the A&E Department (the Emergency Department / Casualty / Medical or Surgical Admissions unit)?" One respondent initially thought that the examples provided in brackets were different options rather than different manners of referring to the A&E department. Another mentioned that they did not understand the meaning of 'Casualty' and a further stated that they had gone to the 'Triage Unit'. It was considered that the small amend detailed below would help clarify the question.

Version included in the 2012 core questionnaire:

2. When you arrived at the hospital, did you go to the A&E Department (the Emergency Department / Casualty / Medical or Surgical Admissions unit)?
₁ ☐ Yes
<sub>2</sub> No
Modified version included in the 2013 core questionnaire:
2. When you arrived at the hospital, did you go to the A&E Department (also known as the Emergency Department, Casualty, Medical or Surgical Admissions unit)?
₁ ☐ Yes
<sub>2</sub> No

### **Exchange of information between healthcare professionals**

This question was carried in the 2012 inpatient core questionnaire, however, it had only three response options (Yes, No and Don't know / can't remember). As 96% of respondents selected 'Yes', this indicated a ceiling effect. As a result, the response options were modified as shown below.

Version included in the 2012 core questionnaire:

8. In your opinion, had the specialist you saw in hospital been given all of the necessary information about your condition or illness from the person who referred you?
₁ ☐ Yes
<sub>2</sub> No
₃ ☐ Don't know / can't remember
Modified version included in the 2013 core questionnaire:
8. In your opinion, had the specialist you saw in hospital been given all of the necessary information about your condition or illness from the person who referred you?
1  Yes, definitely
₂ ☐ Yes, to some extent
₃ □ No
Don't know / can't remember

#### **Intensive care**

Question 10 asks patients about any time they may have spent in a critical care unit and is used to filter patients out of subsequent mixed sex ward questions (as intensive care areas are not required to be single sex). A small number of respondents were unclear on exactly where they had stayed during their inpatient visit and whether or not this had included time in a 'critical care area'. This is quite a difficult issue to entirely resolve due to its subjective nature and it should also be stressed that the vast majority of those taking part in the cognitive testing appeared to answer appropriately given their inpatient experience. Nevertheless, it was considered that the question wording could be improved by adding 'e.g.' to emphasise that the definitions provided in brackets were examples of possible alternative names for the critical care area.

Version included in the 2012 core questionnaire:

# 3 Additional changes for the 2013 inpatient survey

A small number of other changes have been made to the survey this year as detailed below.

## 3.1 Additional sample data required

#### **Clinical Commissioning Groups (CCG)**

Clinical Commissioning Group (CCG) code will also be required this year in both sample and final data. These are required now that PCTs have been abolished. CCGs are groups of GP practices that are responsible for commissioning most health care services for patients. We require the three-character CCG code. This should be the CCG which will be billed for the care of the patient.

### 3.2 Sample data no longer required

#### **General Medical Practice Code (GMPC)**

General Medical Practice Code (GMPC) is no longer required to be included in sample or final data submissions for the 2013 survey. This has been replaced by CCG code (see above).

#### **Referring PCT**

Referring PCT codes are no longer required to be included in sample or final data submissions for the 2013 survey.