THE DEVELOPMENT REPORT FOR THE NHS ADULT INPATIENT SURVEY 2014

Date published: November 2014



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: acute.data@pickereurope.ac.uk

Website: www.nhssurveys.org

Key personnel

Chris Graham (Director)

Caroline Killpack Eliza Swinn Hannah Atherton Mark Waters Susie Stevenson

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1 Introduction

National surveys of adult inpatients have been carried out in all acute trusts¹ in England in 2002, and annually since 2004. The average response rate to the 2013 survey was 49%. In 2014 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. Information drawn from the questions in the 2014 Adult Inpatient survey will be used by the Care Quality Commission (CQC) in its assessment of trusts in England. Questions from the survey will be used within CQC's Intelligent Monitoring system and within CQC's inspections of acute services. The results are also used by NHS England and the Department of Health for performance assessment, improvement and regulatory purposes. These include the NHS Outcomes Framework (domain 4: Ensuring patients have a positive experience), the NHS England overall patient experience measure, the NHS Performance Framework, the cross-Whitehall Public Services Transparency Framework and NICE Quality Standards.

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 2013 survey documents in preparation for the 2014 Inpatient survey.

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¹ 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 2014 questionnaire

The amendments to the 2014 survey questionnaire included: the option of the question bank removed, two questions removed from the survey and two questions added. These changes are outlined in more detail below.

2.1 Removal of question bank

In 2013, the questionnaire had a core set of 78 questions and a question bank. The question bank for the 2014 survey has been removed. This is due to low utilisation by the trusts of the additional bank questions and the hope that shorter questionnaires might increase the response rate of the survey. Additionally, where the question bank was used by trusts an increase in data errors were seen. Therefore, it has been agreed to remove the additional option of having a question bank for Inpatient survey 2014 and to have one set of questions that are compulsory.

2.2 Two questions removed

The 2014 Inpatient questionnaire is as similar as possible to the 2013 questionnaire to allow comparisons to be made between survey years. There are 78 questions, the same number of questions as last year but with two questions removed and two questions added. The question numbers outlined below refer to the relevant survey year. The changes made to the questionnaire are listed below.

Two questions carried in the 2013 Inpatient questionnaire have been removed for the 2014 survey:

65. Did you receive copies of letters sent between hospital doctors and your family doctor (GP)?
¹ ☐ Yes, I received copies → Go to 66
² □ No, I did not receive copies → Go to 67
3 ☐ Not sure / don't know → Go to 67
66. Were the letters written in a way that you could understand?
₁ ☐ Yes, definitely
₂ ☐ Yes, to some extent
₃ □ No
₄□ Not sure / don't know

These two questions have been removed because there was not a strong link to the experience of patients compared to existing questions.

2.3 Questions added

In April 2014, a range of questions were cognitively tested in Oxford with individuals who had been an inpatient in an NHS hospital in the last 6 months. They were recruited using the local newspaper 'Daily Info'. One interviewee did not provide responses to all questions. However, this was not related to comprehension but to the individual themselves.

Two of the tested questions have been included within the 2014 survey questionnaire. Outlined below are the two additional questions, how they cognitively tested and a rationale for inclusion within the annual survey.

33.	Did you	have	confiden	ce in the	decisions	made	about	your	condition	or tre	atment?
1	☐ Yes, a	alway	S								

2 ☐ Yes, sometimes

This question aims to provide an overview of the level of confidence in decisions made about the patient's condition and their treatment. The question tested well and was understood by all participants. Most of the participants (7) felt the decision part of the question referred to medical decisions related to their care or treatment, for instance: decisions for one participant covered decisions that he felt would 'help him to get better quicker'.

Two participants felt that the question covered overall confidence in all decisions, for example covering the medical, procedural and personal circumstances of the patient or 'decisions covering the whole process'.

Six participants explained why they felt that there was a difference in their responses between confidence in doctors and nurses and confidence in decisions. They felt that the earlier questions on doctors and nurses were more about individuals than overall decisions, and that their response to this question was more about the overall picture.

One participant felt that there was very little difference between the questions because it was doctors and nurses making the decisions anyway.

Therefore overall the question tested well and was well understood by all respondents. It provides an overview of the level of confidence in decisions made about the patient's condition and their treatment, and there appears to be a clear distinction between this question and the questions already present in the questionnaire.

67. During your time in hospital did you feel well looked after by hospital staff?
₁ □ Yes, always
₂ ☐ Yes, sometimes
₃ □ No

Nine of the ten participants understood and answered this question, while one participant answered the question but stated that she felt it was a 'weird' question and that she 'did not like it' because to her it was 'too subjective' and a matter of opinion. Nonetheless she responded 'Yes, always'.

The majority of participants (9) responded 'Yes, always' and some of the participants felt that the question referred to all staff, while others felt it focused specifically on nurses, as they would be the ones looking after them during their stay.

'Looked after' covered a variety of different things to the participants including medical and emotional aspects, such as emotional support and encouragement, making sure the patient was comfortable, and being there when it mattered to them. Only one participant selected 'Yes, sometimes' as she felt that she received inconsistent care. No participants responded 'No' to this question.

Overall the question therefore tested well and was well understood by all participants. One respondent did not like the question but she still fully understood what it was asking. The question focuses on the relational side of care and could be an important indicator of the level of attention and support provided to patients.

2.4 Free text comments

An additional change to this year's survey questionnaire is that free text comments are not anonymised before submission to CQC, as a statement has been added to the questionnaire stating that any information provided in the free text box will be shared. This will enable results to be looked at in full by trusts, the CQC and researchers.

3 Additional changes for the 2014 Inpatient survey

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

3.1 CQC Flyer

New for 2014 survey, is the introduction of the CQC flyer that explains who CQC are and how the survey data will be used by them. The flyer was included in the first mailing and second reminder. This was sent directly to all approved contractors and the survey lead at trusts that were completing the survey in house.

3.2 Additional text in mailing letters

For the 2014 survey, additional optional text was added to the mailing letters. The text was introduced for trusts to highlight any improvements that have been implemented within the trust since the 2013 Inpatient survey. The additional text has been added to the first mailing letter and the second reminder. This text was optional for trusts to demonstrate that survey results are useful to inform changes in patient care. Guidance for contractors and in house trusts was published about what was appropriate to include in the mailing letters. For example the additional optional text should not be used for promotional purposes, any claims that are made should be evidenced and only based on the previous year's survey results. The additional text should also be provided in a timely manner to prevent any delays to the questionnaires being mailed out.

3.3 Sample declaration form

The sample declaration form is a new addition for the 2014 Inpatient survey. There were two versions of the form that need to be submitted, one for in house trusts, that will be sent directly to the Co-ordination Centre and one for trusts that use a contractor that will be sent onto the Co-ordination Centre via approved contractors. The sample declaration form was introduced for the Inpatient survey to help prevent a number of section 251 breaches, for example, trusts not separating the mailing file and the sample file, before sharing with approved contractors. The form sets out all steps that must be carried out before data can be shared outside of the trust. It must be signed off by the trust Caldicott Guardian as well as the survey lead prior to trusts submitting their sample data to their approved contractor, or for trusts carrying out the survey in-house, direct to the Co-ordination Centre.