THE KEY FINDINGS REPORT FOR THE 2008 INPATIENT SURVEY

ACUTE CO-ORDINATION CENTRE FOR THE NHS PATIENT SURVEY PROGRAMME

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1 Executive summary

The national NHS patient survey programme

The national NHS patient survey programme is the longest established, and one of the largest, patient survey programmes in the world. The Care Quality Commission assumed responsibility for the programme in April 2009, having taken over many of the functions of the Healthcare Commission. This responsibility covers funding the design, development and co-ordination of the surveys and overseeing implementation of the programme. The survey programme provides a unique opportunity to monitor patients' experiences of healthcare and is an important part of the Commission's assessment of NHS trusts.

Acute hospitals provide both emergency and planned care, including services such as surgery, rehabilitation, and laboratory and diagnostic testing. A national inpatient survey has now been carried out six times since 2002, asking people about their recent experiences as inpatients.

This report details the key findings from the survey of patients who were discharged from acute hospitals in England between the start of June and the end of August 2008¹. Where significant differences exist between years, comparisons are made with the findings of the most recent surveys, i.e. those in 2006 and 2007. Comparisons are not reported when no significant difference was shown between years, or where questions had not been asked previously.

Between October 2008 and January 2009, more than 72,000 patients responded to the survey asking about their recent experiences as an inpatient at one of 165 acute and specialist NHS hospital trusts in England². This represents an overall adjusted response rate of 54%. To be eligible to take part in the survey, patients had to be aged 16 years or older and have had at least one overnight stay in hospital during summer 2008. This survey did not include users of maternity or psychiatric services. Just over half of those who responded were women (54%), most respondents were aged over 50 (76%), and 6% were from a minority ethnic group.

Respondents were admitted to hospital in one of two ways:

- Urgently via the emergency department (57%)
- Planned admission via a referral to a waiting list (43%)

¹ Trusts were able to select the last day of one of three months, June or July or August 2008 and sample back from that date until a sample of 850 eligible patients was achieved. A small proportion of patients (1.1%) included in the total sample were, however, discharged earlier than June 2008. This was necessary to generate the correct sample size for each trust and in compliance with the survey guidance.

² All English acute NHS trusts took part in the survey with the exception of the Moorfields Eye Hospital NHS Foundation Trust, which treats too few people as inpatients to be able to generate a large enough sample for the survey.

1.1 Key findings

Key findings summary

Improvements since the 2007 survey have been identified in the following areas:

- A greater proportion of respondents whose admission was planned were offered a choice of hospital for their first appointment in 2008 (33%) than in 2007 (28%)
- A larger proportion of patients whose admission was planned reported being admitted as soon as they thought necessary in 2008 (76%) than 2007 (72%)
- Respondents who had a planned admission were more likely to have been given a choice of admission dates in the 2008 survey (30%) than in 2007 (27%)
- Fewer patients admitted in an emergency reported having to share a sleeping area with members of the opposite sex after moving wards in 2008 (13%) than 2007 (15%)
- A larger proportion of patients considered the hospital room or ward to be 'very clean' (60%) than in 2007 (53%)
- A considerably larger proportion of patients in 2008 rated the toilets and bathrooms as 'very clean' (52%) than in 2007 (47%)
- Patients were more likely to have had a lockable place to store their personal belongings whilst on the ward in 2008 (31%) than 2007 (28%)
- It was more common for respondents to rate the hospital food as 'very good' (21%) or 'good' (36%) than in 2007 (19% 'very good' and 36% 'good')
- Patients were more likely to have 'always' received help to eat their meals (63%) if they needed it than in 2007 (60%)
- A larger proportion of respondents reported that in their opinion, there were 'always or nearly always' enough nurses to care for them in hospital (58%) than in 2007 (56%)
- A larger proportion of respondents said that, as far as they knew, **doctors** 'always' washed or cleaned their hands, up to 74% in 2008 from 68% in 2007; and more also said that **nurses** 'always' washed or cleaned their hands, up to 76% in 2008 from 70% in 2007
- There was an improvement in the proportion of patients who were given written or printed information about what they should do after leaving hospital (63%) than in 2007 (61%)
- A larger proportion of patients reported that a member of staff 'completely' explained the side effects of their medication to watch for when they went home (38%) than in 2007 (36%)
- There was an improvement in the proportion of patients who reported having received copies of letters sent between hospital doctors and their GP, up from 39% in 2007 to 43% in 2008
- A larger proportion of patients in 2008 had been asked to give their views on the quality of their care (9%) than in 2007 (7%)
- Nearly 8 in 10 patients (79%) rated the care they received in hospital as 'excellent' (43%) or 'very good' (35%) with those rating their overall care as 'excellent' increasing from 42% in 2007 to 43% in 2008

Other positive findings were identified in the following areas:

- The majority of patients (70%) said that they did not share a bathroom or shower area with patients of the opposite sex
- Nearly 8 in 10 patients (79%) reported that they were not bothered by noise at night from hospital staff
- It was uncommon for patients to say they felt threatened by other patients and visitors while in hospital (4%)
- 81% of patients said they 'always' had confidence and trust in the doctors treating them

- Most patients said that doctors (72%) and nurses (78%) did not talk in front of them as if they weren't there
- Two-thirds (66%) of patients said they never received conflicting information from staff
- Most patients (79%) reported having received 'the right amount' of information about their condition or treatment
- The majority of respondents reported that their family and friends had an opportunity to talk to a doctor if they wanted to, either 'definitely' (44%) or 'to some extent' (40%)
- The majority of respondents reported that staff did everything they could to control their pain, either 'definitely' (72%) or 'to some extent' (23%)
- Over half (56%) of respondents waited less than two minutes for the call button to be answered
- Over three-quarters (76%) of patients had received a 'complete' explanation of the purpose of the medicines that they took home in a way they could understand

Declining outcomes were found in the following areas. These areas showed a decline in the proportion of positive responses, and a subsequent increase in reports of poor performance:

- There has been an increase in the proportion of respondents who were not given enough information about their condition or treatment in the Emergency Department, up to 17% in 2008 from 16% in 2007
- A larger proportion of patients reported having been bothered by noise at night from other patients in 2008 (39%) than 2007 (38%)
- Patients in 2008 were more likely to report having a delayed discharge from hospital (40%) than in 2007 (39%)
- A larger proportion of patients wanted to complain about the care they received in hospital, up to 8% in 2008 from 7% in 2007

1.2 Results by aspects of care

The Emergency Department

Information provision

The majority of respondents (73%) said that they were given the 'right amount' of information about their condition or treatment while in the emergency department. However, around a quarter of respondents said they were not given enough information (17%) or were not given any at all (9%), an increase from 2007 where 16% said they were not given enough information.

Privacy

For those admitted via the emergency department, there has been an improvement in the proportion of respondents who said that they were 'definitely' given enough privacy when being examined or treated in the emergency department. The percentage saying this has increased from 75% in 2007 to 76% in 2008.

Waiting times

There has been an overall improvement since 2002 in the proportion of respondents who said they waited less than four hours to be admitted to a bed on a ward after they had first arrived at the hospital, from 67% in 2002 to 72% in 2008. However, there has been no improvement from 2007. The figures for those waiting more than 4 hours will not match those recorded by A&E departments as this survey only covers adults that were admitted as inpatients following their visit to A&E, excluding all children and those admitted for maternity or psychiatric reasons.

Planned admissions

The majority of respondents were referred to the hospital by a doctor from their local general practice (71%). Just under a quarter (24%) were referred by any other doctor or specialist. A small proportion were referred by a practice nurse or nurse practitioner (2%) or by any other health professional such as a dentist, optometrist or physiotherapist (3%).

Choice

There has been an increase in the proportion of patients admitted from waiting lists to say they were given choices about their admission than in 2007. Overall, one-third (33%) said that they were offered a choice of **hospital** for their first appointment, an improvement from 28% in 2007. The remaining 67% of respondents said they were not offered this choice.

There was also an improvement in the proportion of respondents who said that they were offered a choice of **admission dates** – up to 30% from 27% in 2007. More patients (80%) in 2008 also reported that their admission date was not changed by the hospital, an improvement from 79% in 2007 and 78% in 2002.

Waiting times

Overall, 55% of respondents said they waited two months or less to be admitted for a planned treatment. Twenty three percent said they waited 3-4 months, 10% waited 5-6 months and 13% said that they waited more than six months. The results for this question are not comparable with previous years due to changes made to the question wording. Again, these figures are not directly comparable to the Department of Health figures on waiting lists as, for example, they include patients whose admission was delayed for clinical reasons. In addition, the figures from the inpatient survey do not include children.

A greater proportion of patients (76%) felt they were admitted 'as soon as they thought was necessary' in 2008, compared to 2007 (72%) and 2002 (68%). In 2008, 16% thought they should have been admitted a bit sooner and 8% thought that they should have been admitted a lot sooner.

Mixed-sex accommodation and bathrooms

It is a goal of the Department of Health and the NHS to reduce the provision of mixed-sex accommodation to a minimum. This is a complex area to assess using patient experience surveys as patients' reporting of their experience can be influenced by:

- the purpose of the ward they stay in;
- their journey around the hospital many stay in more than one area
- their perceptions of what constitutes mixed-sex accommodation.

To tease out some of these effects, the survey results are presented separately by emergency and planned admissions, and they distinguish between sharing before and after moving to other wards. We also exclude patients who stayed in critical care and admissions units as these areas are exempt from the mixed sex accommodation guidelines.

The majority (90%) of elective patients said that they did not share a sleeping area (for example a room or bay) with patients of the opposite sex when they were **first admitted** to bed on a ward. This represents no change from the 2007 survey results (also 90%) though it is an improvement from 2006 (88%). For those respondents who were **moved to another ward**, 91% said that they did not share a sleeping area with patients of the opposite sex. While this is not a statistically significant improvement from 2007 (90%) it is an improvement from 2006 (89%).

 This means around a tenth of elective patients in 2008 said that they shared a room or bay with patients of the opposite sex, either when they were first admitted to a bed on a ward (10%), or when they were moved to another ward (9%).

Seventy one percent of emergency patients said that they did not share a sleeping area (for example a room or bay) with patients of the opposite sex when they were **first admitted** to bed on a ward. This is no change from 2007 (also 71%) but is an improvement from 70% in 2006. For those respondents who were **moved to another ward**, 87% said that they did not share a room or bay with patients of the opposite sex, an improvement from 85% in 2007 and 84% in 2006.

• This means that just over a quarter (29%) of patients admitted as an emergency said that they shared a sleeping area with patients of the opposite sex when they were first admitted, and just over a tenth (13%) when they moved to another ward.

This year we asked respondents who had shared a sleeping area with patients of the opposite sex if they minded sharing. Among elective patients, 28% of respondents said that they minded sharing when they were first admitted to a bed on a ward, with 36% of those who were moved to another ward saying they minded sharing. Among emergency patients, 37% said they minded sharing when they were first admitted to a bed on a ward, with 43% of those who were moved to another ward saying they minded sharing.

Department of Health guidelines require that bathrooms be single sex. Thirty per cent of respondents said they had used a bathroom or shower area that was also used by patients of the opposite sex, no significant improvement from 2007. These figures exclude patients that reported sharing because they needed specialist bathing equipment.

The Hospital and Ward

Privacy

A higher proportion of respondents (88%) said that they were 'always' given enough privacy when being examined or treated than in 2007 and 2002 (both 87%). The proportion saying they were 'always' given enough privacy when discussing their condition or treatment on the ward increased one percentage point between 2007 (69%) and 2008 (70%), and shows improvement from 2002 (68%).

Noise at night

The proportion of respondents saying they were bothered by noise from other patients has increased from 37% in 2005, to 38% in 2006 and 2007, to 39% in 2008. The proportion of patients who reported having been bothered by noise at night from hospital staff was 21% in 2008, no significant change from 2007. It was, however, an increase from 18% in 2005 and 19% in 2006.

Cleanliness

This area of patient experience showed improvements across all questions in the past year.

The majority of respondents (95%) said their **room or ward** was 'very clean' (60%) or 'fairly clean' (35%), an improvement of two percentage points from 2007 (93%). The proportion of respondents who considered their room to be 'very clean' has improved, up from 53% in 2007 to 60% in 2008, and is at the highest since the patient survey programme began in 2002 (56%).

Ninety one percent of patients described the **toilets and bathrooms** they used as 'very clean (52%) or 'fairly clean' (39%), an increase of three percentage points since 2007 (88%). This improvement was due to an increase in the proportion of respondents describing toilets and bathrooms as 'very clean' – improving from 47% in 2007 to 52% in 2008 and is at the highest since the inpatient survey began (51% in 2002).

Security

A minority of respondents (4%) felt threatened during their stay in hospital by other patients or visitors, and this is unchanged since the last survey. Thirty-one per cent of respondents said that they had somewhere to keep their personal belongings locked away while in hospital, an improvement from 28% in 2007. Sixty five percent had somewhere to keep their personal belongings but were not able to lock them away, and the remaining 4% saying they did not have anywhere to keep personal belongings.

Quality of food

Of those respondents who had hospital food, fifty-seven per cent of respondents rated the food as 'good' (36%) or 'very good' (21%) 2008 - up from 55% in 2007 and 53% in 2002. Thirty per cent said the food was 'fair' while 14% said it was 'poor', both of which represent a fall of one percentage point when compared with the 2007 survey. The proportion of respondents describing the food as 'very good' has gradually increased from 18% in 2002, rising to 21% in 2008. Over three quarters of respondents (78%) were 'always' offered a choice of hospital food, an improvement from 77% in 2007.

Doctors and nurses

Confidence and trust

High levels of confidence and trust continued to be reported by patients in 2008.

The majority (81%) of patients reported 'always' having confidence and trust in their **doctors**, although this has not improved since 2007. A further 17% of patients said that they 'sometimes' had confidence in their doctors.

Three-quarters (75%) of patients said they 'always' had confidence and trust in the **nurses**, an improvement from 2007 (74%). A further 22% of patients said that they 'sometimes' had confidence in their nurses, a decrease from 2007 (23%).

Information and answers to questions

Sixty-eight per cent of respondents said that **doctors** 'always' answered their questions in a way they could understand; this shows no change from the 2007 findings but is an improvement from 65% in 2002. Sixty-six per cent of patients said **that** nurses 'always' gave answers to questions in a way they could understand, up from 65% in 2007 and 63% in 2002.

The proportion of patients who said staff **did not** ever give them **conflicting information** remained the same as 2005, 2007 and 2008 at 66%, but this is an improvement from 69% in 2002.

Staff acknowledging patients

Patients were asked whether doctors and nurses talked in front of them 'as if they were not there'. The majority of respondents said that doctors (72%) and nurses (78%) did not talk in from of them as if they were not there. Six percent said that doctors 'often' or 'sometimes' (22%) talked in front of them with 5% saying nurses do so 'often' and 17% 'sometimes'. However, there has been no change in these figures, for either doctors or nurses, since 2005.

Handwashing

Staff washing or cleaning their hands regularly is important in the control of infection. This area of patient experience showed large improvements across all questions in the past year. There was a significant improvement this year in reports of doctors and nurses washing or cleaning their hands, with the highest proportion of respondents since the question was introduced in 2005 reporting that, as far as they knew, health professionals 'always' washed or cleaned their hands between patients. Nearly three-quarters (74%) of patients said **doctors** 'always' washed or cleaned their hands between patients, a significant increase from 68% in 2007. There was comparable improvement for **nurses** with 76% of patients saying they 'always' washed or cleaned their hands, an increase of six percentage points from 70% in 2007.

Availability of staff

A higher proportion of respondents said they could 'definitely' find someone on the hospital staff to talk to about their worries and fears (41%) compared with 2007 (40%). However, this is a decrease from 2002 (43%).

The proportion of respondents who said that, in their opinion, there were 'always or nearly always' enough nurses on duty to care for them has increased two percentage points since 2007 to 58%.

Patient care and treatment

Involvement in decisions

Nearly 8 in 10 patients (79%) reported having been given 'the right amount' of information about their condition or treatment, no change from 2007. Just over a fifth (21%) said that they were not given enough, with less than 1% saying they received too much information.

There was an increase in the proportion of inpatients who said they were 'definitely' involved as much as they wanted to be in decisions about their care and treatment - from 51% in 2007 to 52% in 2008. A further 37% reported being involved in these decisions 'to some extent'. There was a fall in the proportion of patients who reported not being involved at all – from 11% in 2006 and 2007 to 10% in 2008. Nearly half (48%) of patients were not involved as much as they wanted to be in decisions about their care and treatment.

Of the respondents whose family or someone else close to them wanted to talk to a doctor, 44% reported that they 'definitely' had enough opportunity to do so, with 40% saying they did 'to some extent.' This is an improvement from 2002 (where 42% responded 'yes definitely' and 38% 'yes, to some extent') but no improvement from 2007. However, 16% said their family and friends did not have any opportunity to talk to a doctor.

Pain management

The same proportion of patients in 2008 as in 2007 said they experienced pain while in hospital (66%). Respondents' perception of pain management was unchanged from last year with 72% of respondents saying that hospital staff 'definitely' did everything they could to help control their pain and 23% saying staff did this 'to some extent'. Six percent of patients felt that staff did not do everything they could to help control their pain.

Help from staff to eat meals

Of those who needed it, 18% said that they did not get enough help from staff to eat their meals. However, while this shows improvement from 2006 and 2007 (both 20%) it is a not an improvement from 2002 (18%).

Calling for help using a call button

There was no improvement from previous years in the length of time patients tended to wait for the call button to be answered. The call button was usually answered 'right away' for 17% of respondents, after 1-2 minutes for 39%, and between 3-5 minutes later for 28% of respondents. Fifteen percent said they usually waited longer than five minutes for a response with a minority (2%) saying that they never got help when they used the call button.

Operations and procedures

Sixty-seven per cent of respondents said that they had an operation or procedure during their hospital stay.

Before the operation or procedure

Eighty two percent of respondents said they were 'completely' informed about the risks and benefits of the operation or procedure, no improvement from 2007. Fifteen percent said that they were informed 'to some extent'. Fewer respondents reported not being informed of the risks and benefits – decreasing from 4% in 2007 to 3% in 2008. Nearly three-quarters (74%) of patients reported that staff 'completely' explained what would be done during the operation or procedure, 21% said this was explained 'to some extent' while 5% said they were not given this information, no change since 2007. A similar proportion of respondents (76%) said that a member of staff 'completely' answered questions about their operation or procedure unchanged from 2007,

although fewer respondents said their questions were not answered – decreasing from 4% in 2007 to 3% in 2008. The remainder said that questions were answered 'to some extent' (21%).

Just over half (57%) of patients were 'completely' informed of how they could expect to feel after their operation or procedure, no improvement from 2007, although again fewer respondents said they had not been given this information – decreasing from 16% in 2007 to 15% in 2008. The remaining 28% said they were told 'to some extent'.

Of those respondents (87%), who were given an anaesthetic or pain relief medication before the operation or procedure, 84% reported receiving a 'complete' explanation of how this would be done in a way they could understand. Just 4% said they did not receive this information. Neither of these figures have changed since 2007. The remaining 11% were told 'to some extent'.

After the operation or procedure

There was no change in information provision after the procedure since 2007. Sixty-five percent of patients said they were 'completely' told how their operation or procedure had gone in a way they could understand, 23% said this was explained 'to some extent' while 12% said they did not receive this information.

Leaving hospital

Continuity of care and smooth transitions between services are important to patients once they return home. Good provision of information is crucial for patients to manage their ongoing care, and the 2008 figures show progress in the past year.

There was an overall increase in the proportion of patients who 'definitely' felt involved indecisions about discharge – up from 53% in 2007 to 54% in 2008. Sixteen percent of respondents reported not feeling involved in these decisions with the remainder (30%) feeling involved 'to some extent'.

Waiting for discharge from hospital

The proportion of respondents who said their discharge was delayed increased to 40% in 2008, up from 38% in 2005 and 2006 and 39% in 2007.

More than half (54%) of these respondents said their discharge was delayed by more than two hours, a rise from 53% in 2007. The most common reason for delayed discharge was waiting for medicines (60%) followed by waiting to see a doctor (17%). There have been no significant changes in the results for these questions.

Information at discharge

The proportion of respondents who were given written or **printed information about their medicines** continued to improve in 2008. Overall, 67% of respondents received this information, an improvement from 2005 (62%), 2006 (65%) and 2007 (66%).

The proportion of respondents saying they were **not told** about **possible side effects** when taking medicines home fell to 44%, the same proportion as in 2002 and an improvement from 2007 (46%). However, 8% of respondents said that the **purpose of their medicines** was not explained to them in a way they could understand, no improvement from 2007. Seventy-six per cent of patients reported that they were 'definitely' told how to take their medication in a way they could understand, an increase of less than one percent from 2007. Nine percent of patients said they were not told how to take their medication.

Sixty-three percent of respondents in 2008 said they were given written or printed information about what they should or should not do after leaving hospital, an improvement from 61% in 2007. A larger proportion of respondents in 2008 said they were 'completely' told about any danger

signals to watch for when they left hospital – up from 39% in 2007 to 40% in 2008. Fewer patients reported not receiving this information (39%) than in 2007 (41%). The remaining 21% said they received this information 'to some extent'.

There has been an increase in the proportion of respondents saying that hospital staff told them who to contact if they were worried about their condition or treatment after they left hospital, up one percentage point to 75%, although this is still not as high as in 2005 and 2006 (76%). There was also improvement in the proportion that said doctors or nurses 'definitely' gave their family or someone close to them the information they needed to care for them - up from 43% in 2007 to 44% in 2008.

Copies of letters

Department of Health guidance states that patients should receive copies of letters between the hospital and the patient's family doctor. The majority of respondents did not receive a copy (57%), but there has been a steady improvement, with 43% saying they received a copy in 2008, up from 35% in 2005, 37% in 2006 and 39% in 2007.

Overall care

The percentage of respondents rating their overall care as either 'excellent', 'very good' or 'good' has increased one percentage point since the 2007 survey to 93% in 2008. The proportion of patients who rated their care as 'excellent' has increased each survey year, to reach 43% in 2008. In 2002, 38% of patients rated their overall care as 'excellent'; rising to 40% in 2005, 41% in 2006, and 42% in 2007.

The proportion of patients who rated the teamwork of doctors and nurses as 'excellent', 'very good' or 'good' rose from 92% in 2007 to 93% in 2008.

Respect and dignity

There has been an increase in the proportion of respondents saying they were 'always' treated with respect and dignity, up one percentage point from 2007 to 79% in 2008. Eighteen per cent of patients said they were 'sometimes' treated with respect and dignity while the remaining 3% said they were not.

Complaints

More patients in 2008 reported having been asked to give their views on the quality of their care – up to 9% from 7% in 2007. While in hospital, 38% of respondents remembered seeing posters or leaflets explaining how to complain about their care, up from 37% in 2007.

The majority of respondents (92%) did not want to complain about the care they received in hospital, however, there was an increase in the proportion of respondents in 2008 saying they did want to complain (8%), up from 7% in 2007.

2 Introduction

The national patient survey programme was established by the Department of Health and has been operating since 2002. The Care Quality Commission (CQC) is the new independent regulator of all health and adult social care in England and has administered the programme since April 1st 2009¹.

The Department of Health commissioned the Picker Institute to design and co-ordinate the first national inpatient survey in 2002. This was followed by an adult inpatient survey in 2004, 2005, 2006, 2007, and 2008, overseen by the Healthcare Commission. This report summarises key findings from the 2008 survey and highlights differences with the 2002, 2005, 2006 and 2007 results. The 2008 findings were used by the Care Quality Commission as part of its 2008/09 annual health check to measure the quality of care being provided to patients (see <u>Annual health check ratings</u>).

The 2008 survey was carried out in 165 acute and specialist NHS trusts in England that had sufficient numbers of adult inpatients to take part. Each trust identified a list of 850² eligible patients who had been consecutively discharged in the period June to August 2008. Patients were eligible if they were 16 years or older, had at least one overnight stay, and were not admitted to maternity or psychiatric wards.

This report compares the results from all questions in 2008 with those from 2002, 2005, 2006 and 2007. Because a separate survey of children and young people (aged 0-17 years) took place in 2004, only those aged 18 years and over were included in the sample for the 2004 inpatients survey. The 2004 results are therefore not discussed here due to the difference in the sample for that year.

Z-tests were used to test for differences between years. All differences noted in this report are significant at the 5% level (p<0.05)³ except when specifically mentioned otherwise. Appendicised tables present data to one decimal place, but where values are discussed in the text of the report, these are rounded up from two decimal places. Due to rounding, the sum of responses discussed in the report may not always equal 100%.

Caution must be exercised when comparing results broken down by subgroups, or when looking at associations that have been found between responses to different questions. This is because the relationships between both the responses and characteristics of respondents are complex, and the analysis presented here does not control for all relevant factors. That is, although two things may appear to be connected, the analysis is not sufficient to prove that there is a causal link between them: it might equally be that an additional variable is responsible. For example, people giving a certain response to one question may appear more likely to give a specific response at another, but it may actually be due to differences in the characteristics of respondents. This report aims to identify and describe the associations, not to make conclusions about the nature and cause of such associations.

¹ Before April 1st 2009, the national patient survey programme was carried out by the Healthcare Commission, and by the Commission for Health Improvement from late 2003 until the formation of the Healthcare Commission on April 1st 2004.

² The Royal National Hospital for Rheumatic Diseases NHS Foundation Trust has a small number of beds and was only able to generate a sample of 457 eligible patients. It achieved an above average adjusted response rate of 69%.

³ The Bonferroni correction for multiple comparisons was used in cases where data was available for all four years

More information on the methods and tables showing the results of this survey are included in the appendices.

3 Admission to hospital

Overall, 57% of survey respondents had experienced an emergency or urgent admission, while 43% were admitted from a waiting list or for a planned admission. Since the survey programme was established in 2002, there has been an increase in the proportion of emergency admissions, (from 52% in 2002, to 55% in 2005 and 2006 and 56% in 2007) with a corresponding decrease in the proportion of patients whose hospital stay was planned in advance.

3.1 The Emergency Department

Over half of the respondents to this survey (57%) had an emergency or urgent admission to hospital. Of these, the vast majority (88%) went to the Emergency Department (specifically Casualty, Accident and Emergency (A&E), or a Medical or Surgical Admissions Unit) when they arrived at the hospital. As 84% of patients who attend emergency departments are not subsequently admitted to hospital (Hospital Activity Statistics, Department of Health, first and second quarters 2008-09¹), these survey findings relate only to the small proportion of patients who were admitted to hospital from the emergency department and cannot be directly compared to the experiences of all emergency patients.

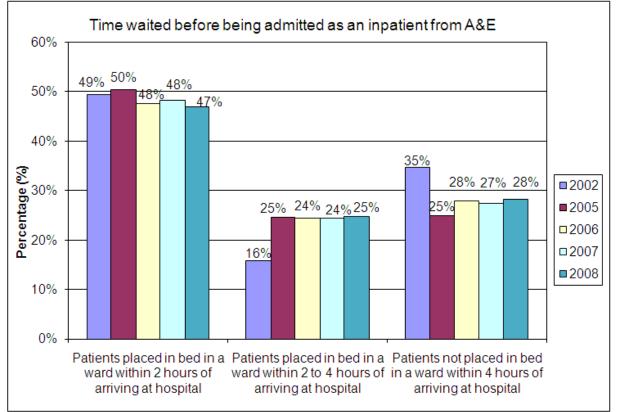
A maximum four-hour wait in the emergency department from arrival to admission, transfer or discharge has been an operational standard in the NHS since 2005. To allow for clinical exceptions, all providers of emergency care are expected to maintain performance of at least 98% against the four hour target². However, these survey results cannot be used to give a definitive assessment of the operational standard for waits in the emergency department from arrival to admission, transfer or discharge because of exclusions made during the sampling for this survey. Specifically, we exclude patients aged less than 16 years and so children and young people admitted through the emergency department are not included in these survey findings, nor are maternity patients, psychiatric patients, private patients and patients without a UK postal address, as well as those patients not admitted for an inpatient stay.

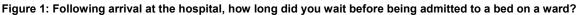
Overall, fewer than three-quarters (72%) of patients reported waiting less than 4 hours between the time they arrived at hospital and being admitted to a bed on a ward. This is a significant improvement from 2002, when 67% of patients were admitted within 4 hours. Nearly half of patients (47%) reported being admitted in less than two hours in 2008³, a decline from 48% in 2007 and 2006, and 52% in 2002.

¹ The figures from quarters one and two correspond to the period April to September 2008.

² Clinical exceptions to the 4 hour emergency care target, Department of Health, December 2003

³ The proportion of responses for the three options 'Less than 1 hour' (21.7%), 'At least one hour but less than 2' (17.7%) and 'I did not have to wait' (7.6%) were added together, to calculate the proportion of patients who were admitted within two hours (47%).



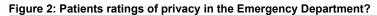


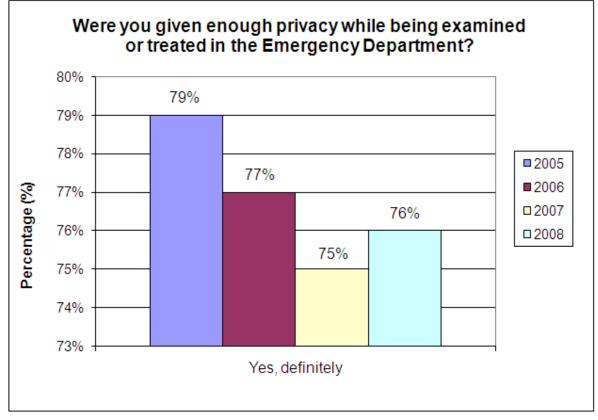
Information provided in the emergency department displays stability over recent years. Across England, nearly three-quarters of respondents (73%) admitted through an emergency department said that they were given the 'right amount' of information about their condition or treatment, no significant change from previous years (74% in 2007, 72% in 2006 and 73% in 2005). In 2008, 17% of respondents felt that they were not given enough information about their condition or treatment, an increase from 2007 (16%), and 2005 (15%), and the same proportion as in 2006.

In 2008, the proportion of patients reporting receiving no information about their condition or treatment (9%) did not improve significantly from 2007 (10%) but was a significant improvement from 2006 and 2005 (both 11%). As with previous years, the proportion who were given 'too much' information remained below 1%.

A significantly larger proportion of male respondents (75%) reported receiving the 'right amount' of than female respondents did (70%). A significantly higher proportion of women (11%) than men (9%) instead reported not receiving any information about their condition or treatment while in the Emergency Department.

The proportion of patients who said they were 'definitely' given enough privacy during examinations or treatment in the emergency department (76%) has significantly improved since 2007 (75%), but is still lower than that in 2006 (77%) and 2005 (79%). In 2008, a further 22% reported having enough privacy 'to some extent', a decrease from the 2007 figure of 23%. The proportion of respondents who said they were not given enough privacy remained at 2%.





Reports of privacy varied significantly between patients of different age groups, with the younger age groups reporting lower standards of privacy. Patients aged 16 to 35 were less likely (67%) to say that they were 'definitely' given enough privacy while being examined or treated in the emergency department, compared with patients aged 36 to 50 (71%), 51 to 65 (75%) and over 65 years of age (79%). There were also significant differences in the proportion of male and female patients who reported high standards of privacy. While 77% of male patients reported 'definitely' being given enough privacy in the emergency department, only 75% of female patients reported this.

Waiting list or planned admissions

Only one-third of patients (33%) were offered a choice of hospital for their first hospital appointment, but there was a large improvement in this figure since 2007 (28%). There was a similar improvement in the proportion of patients who were given a choice of admission date, with 30% of patients reporting that they were offered a choice. This represents an improvement from the past three survey years (27%).

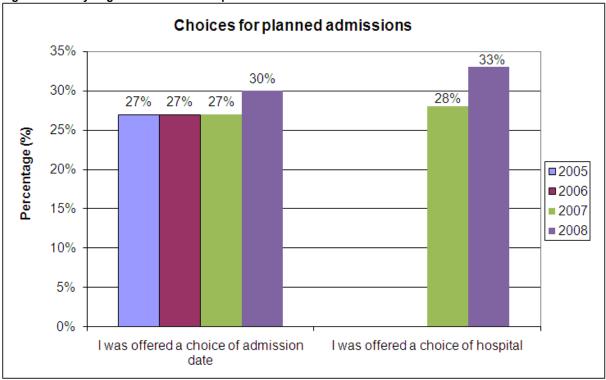
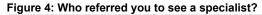
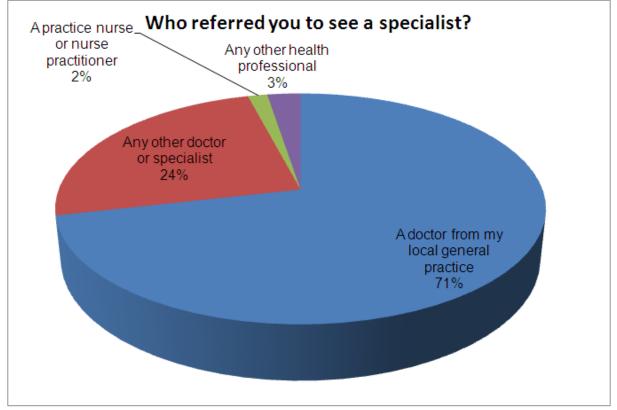


Figure 3: Were you given a choice of hospital and admission date?

In 2008 there was also an increase in the proportion of patients whose admission date was not changed by the hospital (80%), up from 79% in 2007. However, this means that one fifth of patients (20%) did subsequently have their admission date changed by the hospital, an improvement from 2007 (21%) and 2002 (22%). Seventeen percent of respondents in 2008 had their appointment changed once. As in the past three survey years, the proportion of patients whose admission date changed 2 or 3 times remained at 3%. Fewer than 1% of respondents said they had their admission date altered 4 times or more, an improvement from 2002 (1%). Patients who were given a choice of admission dates were no more likely to have their admission date changed by the hospital (19%) than were patients who were not offered a choice of admission dates (21%).

A new question was included in the 2008 survey, asking patients about who referred them to see a specialist. The majority of patients (71%) answered that they were referred by a doctor from their local general practice, while a further quarter (24%) had been referred by another doctor or specialist. Just 2% of patients were referred by a practice nurse or nurse practitioner, and 3% reported having been referred by another health professional, such as a dentist, optometrist or physiotherapist.





In terms of waiting times for admission, 29% of respondents said they waited one month or less from the time they first talked to a health professional about being referred to hospital, to their admission date. One quarter (25%) waited 1 to 2 months, 23% waited 3 to 4 months, 10% of respondents waited 5 to 6 months and 13% of patients reported waiting more than 6 months to be admitted to hospital. Because of the change to the previous question about who referred the patient, previous data is not comparable with this question.

There was a large improvement in the proportion of respondents who felt that they had been admitted 'as soon as necessary', to 76% in 2008, from 72% in 2007. This is the highest proportion of patients who reported this since the national patient survey programme began in 2002 (68%) Just 8% of patients said they should have been admitted 'a lot sooner', a decrease from 10% in 2007 and 12% in 2002.

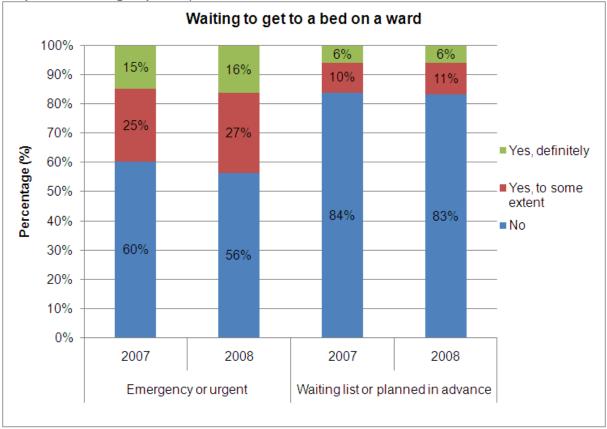
When broken down by age, views on waiting times varied between patients from different age groups. The youngest patients (those aged 16 to 35) were least likely to have reported being admitted 'as soon as I thought was necessary' (69%), compared to patients aged 36 to 50 (75%), 51 to 65 (76%) and over 65 (77%). Conversely the youngest aged group had the highest proportion of patients who felt they 'should have been admitted a lot sooner' (12%) compared to patients aged 36 to 50 (10%), 51 to 65 (8%) and over 65 (7%).

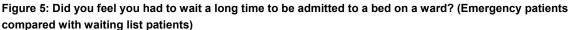
There were also differences between male and female patients in their views on waiting times. A significantly higher proportion of female patients reported being admitted 'as soon as I thought was necessary' (77%) than male patients (75%).

4 The hospital and ward

Patients' perception of time spent waiting to get a bed on a ward still indicates some delays at admission. A smaller proportion (69%) of patients said they did not feel that they had to wait a long time to get to a bed on a ward than in 2007, 2006 (both 71%) and 2005 (73%). In 2006, 2007 and 2008, 11% of patients said they 'definitely' felt they had to wait a long time to get to a bed on a ward from when they arrived at the hospital, although this is a significant improvement from 2002 (13%). A further 19% of respondents felt that they had a long wait 'to some extent', an increase from 2007 (18%).

Differences in patients' perception of time spent waiting before they were admitted to a bed on a ward were evident when the results were broken down according to route of admission. Over eight in ten (83%) patients who arrived for a planned admission stated that they did not feel that they had to wait a long time to get a bed on a ward, compared with 84% in the past three survey years. Only a small proportion (6%) of planned admissions reported that they 'definitely' fell like they waited a long time to get to a bed on a ward, the same figure as in 2007, while a further 11% responded 'to some extent'. By comparison, fewer than six in ten (56%) patients admitted in an emergency reported not having to wait a long time to get a bed on a ward, down from 60% in 2007. Compared to patients admitted from a waiting list, a larger proportion (16%) of emergency patients 'definitely' felt like they had a long wait, although this does represent an improvement from 2002 (20%). An additional 27% of respondents considered the wait as long 'to some extent'.





Overall, one-fifth (21%) of patients said they had stated in a critical care area (intensive care unit, coronary care unit or high dependency unit), no significant change from 2007 (20%).

There has been an overall increase since 2006 in the proportion of respondents who stayed in more than one ward, from 34% in 2006 to 36% in 2008. However, there has been no change from 2007. Moving ward was more likely among patients who reported that they had stayed in a critical care area, with 60% of these patients staying in more than one ward, compared to just 29% of patients who did not stay in a critical care area; in 2007, these figures were 60% and 28%, respectively. Patients who were admitted as an emergency were more likely to say they moved wards (47%) than were patients whose admission was planned (20%). These figures are unchanged from 2007.

4.1 Sharing facilities with patients of the opposite sex

Single-sex accommodation is defined as separate sleeping areas for men and women, and segregated bathroom and toilet facilities for men and women. In an acute hospital setting, some areas are excluded from these standards - including critical care areas (intensive care units, coronary care units or high dependency units) and admission wards. This survey asked a series of questions to determine whether respondents had shared a sleeping area (for example, a room or bay) with patients of the opposite sex while in hospital, and if so, at which point during their hospital stay. Respondents who said they did stay in a critical care area (CCA) have been excluded from the following analysis¹ and the remaining patients divided into planned admissions and emergency admissions, because some admission wards are exempt from the mixed sex accommodation guidelines

Emergency admissions

Twenty-nine per cent of emergency respondents said that, when they were first admitted to hospital, they shared a sleeping area such as a room or bay with a member of the opposite sex, unchanged since 2007 but an improvement from 2006 (30%). However, of those who said they moved wards, 13% said they were in mixed-sex accommodation after they moved, an improvement from 2006 (16%) and 2007 (15%).

Planned admissions

Ten per cent of respondents who had a planned admission to hospital said they shared a sleeping area such as a room or bay with a member of the opposite sex when first admitted to hospital. This is not a significant decrease from 2007 but is lower than 2006 (12%). For those respondents who were moved to another ward, 9% said they shared a sleeping area after being moved; again, this is not a significant change from the previous year but is a significant decrease from 2006 (11%).

Patients' views of sharing

This year we asked respondents who had shared a sleeping area with patients of the opposite sex if they minded sharing. Among elective patients, 28% of respondents said that they minded sharing when they were first admitted to a bed on a ward, with 36% of those who were moved to another ward saying they minded sharing. Among emergency patients, 37% said they minded sharing when they were first admitted to a bed on a ward, with 43% of those who were moved to another ward saying they minded sharing.

¹ Compliance with the Department of Health's commitment to provide single-sex sleeping accommodation is measured by the Care Quality Commissions assessment of Core Standard C20b. This recognises that in areas such as critical care units and emergency departments, the clinical needs of patients take priority over segregation by gender, but trusts are still expected to do all that they reasonably can to provide separate sleeping areas for men and women.

Men and women also reported different experiences of sharing mixed-sex accommodation. Fortythree percent of women reported minding sharing facilities when first admitted, compared to just 22% of male patients. This difference remained among patients who moved wards, with 50% of female patients saying that they minded sharing at this stage, while only 25% of male patients said this. There were no significant differences between age groups in the proportion of patients who reported minding sharing facilities either when first admitted or after moving wards.

Sharing bathrooms

Department of Health guidelines require that bathrooms be single sex. Thirty per cent of respondents said they had used a bathroom or shower area that was also used by patients of the opposite sex, no significant change from 2007 but an improvement from 2006 (31%). These figures exclude patients that reported sharing because they needed specialist bathing equipment, and those who stayed in a critical care area.

Patients admitted through the emergency department were more likely to have shared bathroom facilities with members of the opposite sex: 34% of emergency patients said they shared a bathroom or shower area, no change from 2006 and 2007 (both 34%). A smaller proportion of patients whose admission was planned reported sharing bathroom facilities in 2008 (23%), no change from 2007 (24%), but an improvement from 2006 when 25% of respondents reported sharing these facilities.

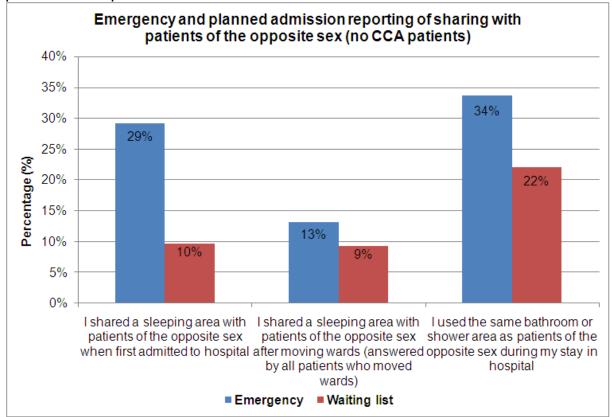
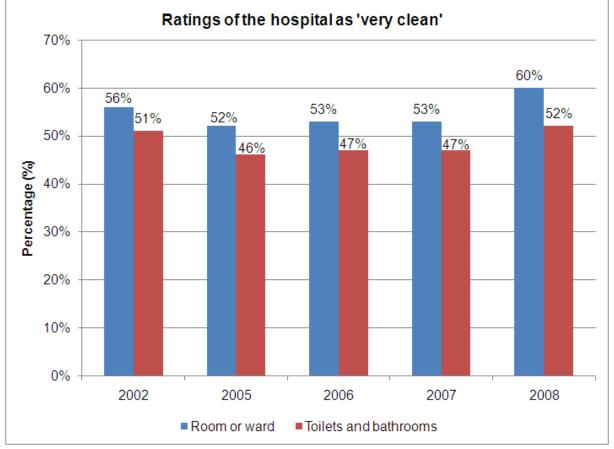


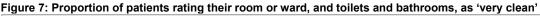
Figure 6: Differences in responses to questions on mixed-sex wards and bathrooms between emergency and planned admission patients

4.2 Cleanliness

Ratings of cleanliness have improved since the previous survey. The vast majority of patients (95%) rated the cleanliness of the hospital room or ward they stayed on as 'very clean' (60%) or 'fairly clean' (35%), an increase from previous years (93% in 2007, 2006 and 2002, 92% in 2005) which illustrates sustained improvement over the last few years. Three-fifths (60%) of patients considered the hospital room or ward they stayed in as 'very clean', up from 53% in 2007 and 2006 and 52% in 2005. Just 1% of respondents rated their hospital room or ward as 'not at all clean', a decrease from 2007.

There were equivalent improvements in the cleanliness ratings of toilets and bathrooms. Again, the majority of patients (91%) rated the cleanliness of hospital toilets and bathrooms as 'very clean' (52%) or 'fairly clean' (39%), a significant improvement from previous years (88% in 2007, 2006 and 2002, 87% in 2005). Over half (52%) of patients considered the toilets and bathrooms to be 'very clean', up from 47% in 2006 and 2007, and 46% in 2005. Two percent said the bathrooms and toilets were 'not at all clean', a decrease from 3% in 2007.





When the results to these questions are broken down by gender, a significantly larger proportion of male respondents (63%) than female respondents (59%) considered the ward to be 'very clean'. This same pattern was true of ratings of the toilets and bathrooms: a higher proportion of men (55%) rated the toilets and bathrooms as 'very clean' than women did (50%).

Patients from different age groups reported different standards of cleanliness, both of wards and toilet facilities. The table below displays the proportions of patients who gave ratings of 'very clean', by age group:

Age group	Room or ward	Toilets and bathrooms
16 - 35 years	49%	39%
36 - 50 years	54%	44%
51 - 65 years	59%	51%
65 years or over	65%	59%

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4.3 Food

Ratings of hospital food have continued to improve this year, with an increase of two percentage points in the proportion of patients who rated the food they received as 'very good' (up from 19% in 2007 to 21% in 2008). The proportion of patients rating the food as 'fair' or 'poor' each dropped one percentage point in 2008, when 30% of patients considered the food to be 'fair', and 14% rated it as 'poor'. These findings also represent a significant increase from 2002, indicating that trusts are making sustained progress in the quality of food.

There was also an improvement in the proportion of respondents who said that, if they needed it, staff 'always' gave them enough help to eat their meals, up from 60% in 2007 to 63% in 2008. Correspondingly fewer patients reported not being given enough help (down from 20% in 2007 to 18% in 2008). Progress was also made in offering patients a choice of food, with 78% of patients reporting that they were 'always' given a choice, up from 77% in 2007. Fewer patients (6%) in 2008 were not given a choice of food than in 2007 (7%).

Patients' ratings of the food they ate were strongly related both to whether they were given a choice of meal and whether they had enough help from staff to eat their meals. Only 5% of patients who reported that they were not offered a choice of food rated the food as 'very good', compared with 25% of those who said that they were 'always' offered a choice of food. Conversely, 'poor' ratings of hospital food were more common among patients who had not been offered a choice of food: 39% of patients who said that they were 'always' offered a choice of food rated the food as poor compared with only 9% of patients who were 'always' offered a choice of food. Similarly, patients who said that they did not have enough help from staff to eat their meals were five times as likely to rate the food they ate as 'poor' (35%) compared with patients who 'always' had enough help from staff to eat their meals (7%). A larger proportion of patients who reported 'always' having received enough help to eat their meals rated the hospital food as 'very good' (32%) than those who did not receive enough help to eat (7%).

4.4 Noise on hospital wards

This is an area of patient experience that is not showing improvements, both in the past year and longer-term. The proportion of respondents who said they were bothered by noise at night from other patients (39%) increased from 2007 (38%), 2006 (also 38%) and 2005 (37%). Over one-fifth of patients (21%) reported being disturbed by hospital staff making noise at night, no significant change from 2007 (20%).

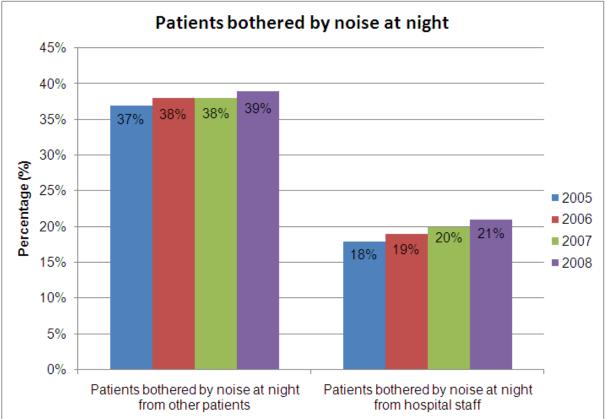


Figure 9: Proportion of patients bothered by noise at night from other patients or hospital staff

There were large variations in reports of noise at night when the results are broken down by gender. A higher proportion of women were disturbed by noise at night caused by both hospital staff and other patients. A significantly larger proportion of women reported having been disturbed by noise at night from other patients (40%) than did male respondents (37%). Women were also significantly more likely to have said they were disturbed by noise at night from hospital staff (22%) than male respondents were (18%). There was no clear pattern across different age groups in the number of patients reporting noise at night from either other patients or staff.

4.5 Safety and security on hospital wards

There was no change since 2007 in the proportion of patients who said that they felt threatened by other patients or visitors during their stay in hospital (4%). Female patients were significantly more likely to report feeling threatened than were male patients (4% and 3%, respectively). Patients in the younger age groups (aged 16 to 35 and 35 to 50) were the most likely (5%) to have felt threatened during their stay, while a significantly smaller proportion of patients aged 51 to 65 (4%) and over 65 (3%) said they felt threatened by other patients or visitors.

The Department of Health specifies minimum criteria for a ward as including "facilities for patients to securely store their belongings"¹. Almost all patients (96%) reported having somewhere to keep their personal belongings whilst on the ward. However, 68% of these patients could not lock this space. Although there has been a large improvement in the proportion of respondents who did

¹ http://www.performance.doh.gov.uk/hospitalactivity/nhsweb/qmaefg.htm

report having a lockable place to store their belongings (from 28% in 2007 to 31% in 2008), the figures indicated that for the majority of patients, this did not meet the Department of Health minimum criteria in having a secure place to store their belongings whilst on the ward.

5 Doctors and nurses

When asked about relationships between hospital staff, more than nine out of ten patients (93%) rated the way doctors and nurses worked together as 'excellent', (39%) 'very good' (39%) or 'good' (14%), an increase from 2007 and 2006 (92%). The proportion of respondents rating this as 'excellent' was 39%, the same proportion as in 2007 and but an increase from 36% in 2006 and 38% in 2005.

5.1 Answers to questions

Sixty eight percent of respondents said that doctors 'always' replied to their questions with answers that they could understand; no change from 2007. However, this is a significant improvement from 2002, when only 65% of patients always received answers to their questions that they could understand. A further 27% in 2008 said they 'sometimes' got answers they could understand. The proportion of patients who did not get a comprehensible answer from doctors (5%) in 2008 also showed no significant difference from the 2007 survey results.

When the results are broken down by gender, male patients were significantly more likely to say that doctors 'always' answered their questions in a way they could understand (70%) than were female patients (67%).

The proportion of respondents who said that nurses 'always' gave them an answer they could understand increased one percentage point this year, from 65% in 2007 to 66% in 2008. It is also a significant improvement from 2002 (63%), 2005 (65%), and 2006 (65%), indicating that some long term progress has been achieved. A further 29% of patients in 2008 said that they 'sometimes' understood answers given by nurses, no change from 2007. However, the proportion of patients who said that nurses did not give them answers they could understand remained at 5%.

When broken down by gender, the results show that a significantly higher proportion of men said that nurses 'always' answered their questions in a way they could understand (70%) than female patients (65%).

Patients from different age groups reported diverse experiences with respect to answers to questions, both from doctors and nurses. The table below displays the proportions of patients who reported 'definitely' having their questions answered in a way they could understand, by age group:

Age group	Doctors	Nurses
16-35 years	55%	55%
36-50 years	65%	63%
51-65 years	72%	70%
65 years or over	70%	69%

Figure 10: Proportion of patients 'definitely' having their questions answered by doctors and nurses

5.2 Confidence and trust

Although a greater proportion of respondents said that they 'always' had confidence and trust in the doctors that treated them (81%) compared with nurses (75%), nurses are showing greater improvements in this area over time. The proportion of respondents who reported 'always' having confidence and trust in the nurses treating them increased by one percentage point in the past year, up from 74% in 2007, while among doctors, there was no significant improvement. The proportion of respondents who did not have confidence and trust in staff was equal for both nurses and doctors (3%), and showed no change from 2007.

A greater proportion of respondents said that doctors talked in front of them as if they weren't there than nurses did. Over a quarter of patients (28%) reported that doctors 'often' (6%) or 'sometimes' (22%) spoke to others in front of them as if they were not there, while 22% said this for nurses (5% 'often' and 17% 'sometimes'). None of these results is significantly different from last year's findings.

When the results are broken down by age, there was a progressive increase in the proportion of patients reporting 'always' having confidence and trust in the doctors. Patients in the youngest age group (16 to 35 years) had the lowest proportion of patients reporting this (68%), compared to patients aged 36 to 50 (75%), 51 to 65 (82%) and over 65 years (85%). This same pattern was evident in ratings of confidence and trust in nurses: patients in the youngest age group (16 to 35 years) had the lowest proportion of patients reporting 'always' having confidence and trust in the nurses treating them (62%), compared to patients aged 36 to 50 (69%), 51 to 65 (76%) and over 65 years (79%).

When broken down by sex, a significantly higher proportion of men (83%) stated 'always' having trust and confidence in their doctors than women did (79%). This same pattern was true of confidence and trust in nurses: 80% of men reported 'always' having trust and confidence in them, compared to 72% of women.

5.3 Hand washing and cleaning

A report by the National Audit Office (2000)¹ states that handwashing is "regarded by many as one of the most effective preventative measures against hospital acquired infection, and is one example of good practice that needs to be more widely implemented". This is the fourth consecutive year that questions have been asked about hand washing or cleaning by hospital staff between touching patients. In 2008, hand hygiene showed the greatest improvements since the previous survey. It was, however, still more common for patients to report that as far as they knew nurses 'always' or 'sometimes' washed or cleaned their hands between touching patients, than doctors.

Seventy six percent of patients said that as far as they knew, nurses 'always' washed or cleaned their hands between touching patients, an increase of 6% from 2007 (70%) and a further improvement from 2006 (71%) and 2005 (69%). Just 4% of patients said that nurses did not wash or clean their hands between touching patients, down from 7% in 2007. There was an equal increase of 6% in the proportion of patients saying that as far as they knew, doctors 'always' washed or cleaned their hands between touching patients, up from 68% in 2007 to 74% in 2008. This figure is also an improvement from 2006 (69%) and 2005 (67%). Eight percent of patients

¹ Comptroller and Auditor General of the National Audit Office. *The Management and Control of Hospital Acquired Infection in Acute NHS Trusts in England*, pages 1 and 7. London: the stationery office, 2000.

said that doctors did not wash or clean their hands between touching patients, down from 12% in 2005, 2006 and 2007.

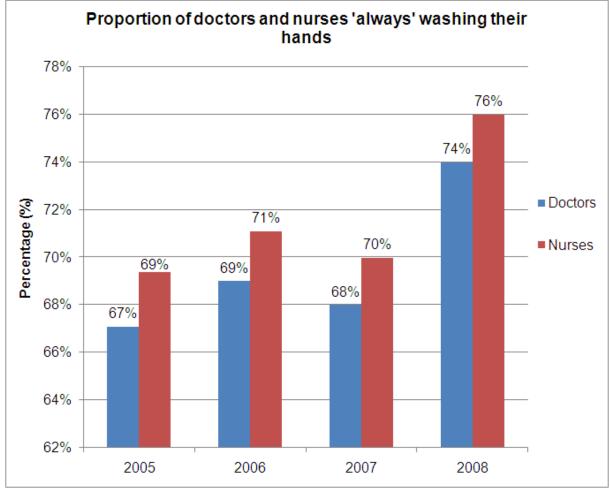


Figure 11: Patient reporting of hand washing and cleaning by doctors and nurses

Both questions on hand washing/cleaning have an additional response option of 'don't know / can't remember which is not included as a specific response to this question for reporting but is very important in interpreting these results. Patients in 2008 were more aware of doctors' handwashing habits: just over one-third (36%) of patients said that they did not know or could not remember if doctors had washed or cleaned their hands, compared to 40% in 2007 and 41% in 2006. Respondents were more aware of whether nursing staff washed or cleaned their hands between patients with only 24% selecting 'don't know / can't remember', a decrease from 27% in 2006 and 2007.

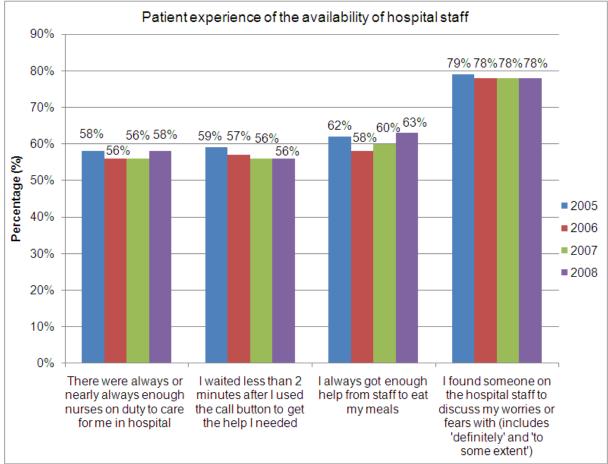
6 Patient care and treatment

6.1 Availability of staff

Over half of respondents (58%) reported that in their opinion there were 'always or nearly always' enough nurses on duty to care for them while in hospital, an increase of two percentage points since 2007 (56%). Forty-two percent of respondents conversely said, that in their opinion, there were 'sometimes' (31%) or 'rarely' (11%) enough nurses on duty to care for them while in hospital, an improvement from 2007 and 2006, when these figures were 32% and 12%, respectively.

For obvious reasons, it would be expected that availability of staff is related to patients' reports of time spent waiting for the call button to be answered. There was no significant change in the time patients spent waiting for help after using the call button since the last survey. Responses to the call button within two minutes did not change in 2008, remaining at 56%, but a significant drop from 59% in 2005 and 57% in 2006. As in 2006 and 2007, the proportion of patients who said that it took more than five minutes for a member of staff to answer the call button was 15%. In 2005, this figure was lower at 13%. The proportion of respondents who reported never getting help when they used the call button remained low (2%).

A larger proportion of respondents who answered that there were 'always or nearly always' enough nurses to care for them also reported having received help within two minutes of using the call button (72%) than did patients who 'sometimes' felt there were enough nurses (44%) and those who felt there were 'never' enough nurses (22%).





6.2 Involvement in care

Involvement in decisions about patients' care and treatment has improved in 2008: fifty-two percent of patients said they 'definitely' felt involved (an increase from 51% in 2007), while a smaller proportion of patients (10%) reported not feeling involved in decisions than in 2007 (11%). When the results are broken down by sex, a significantly larger proportion of male respondents (54%) reported 'definitely' being involved as much as they wanted to be, compared to female respondents (52%). The proportion of respondents who reported not being involved was the same for men and women (10%).

As in the past three survey years, nearly 8 in 10 patients (79%) in 2008 judged that they received 'the right amount' of information about their condition or treatment. A further 21% of patients said that they were not given enough information, no improvement since 2005 (20%). The proportion of patients who reported receiving too much information (1%) did, however, increase significantly from 2007.

Overall, 81% of male respondents felt they received 'the right amount' of information about their condition or treatment, a significantly higher proportion than the number of women who gave this answer (77%). Patients' judgements about the amount of information they received about their care and treatment also varied between different age groups. Overall, 71% of patients aged 16 to 35 said they received 'the right amount' of information about their condition or treatment, compared to 75% of patients aged 36 to 50 and 81% of patients aged 51 to 65 and over 65 years of age.

Not surprisingly, there was an association between the findings from questions on information provision and involvement in care. Two-thirds (67%) of patients who reported not being involved enough in decisions about their care and treatment also said they did not receive enough information about their condition or treatment, compared to just 5% of those who 'definitely' felt involved as much as they wanted to be. Patients who reported involvement in their decisions and treatment also reported receiving appropriate amounts of information. Ninety-four percent of patients who said they were 'definitely' involved as much as they wanted to be also reported receiving 'the right amount' of information about their condition or treatment. Of those who were involved 'to some extent', the majority (70%) also said that they received 'the right amount' of information about their condition or treatment, while only 32% of patients who were not involved in decisions also said that they were given enough information about their care and treatment. These findings indicate an association between information provision and involvement in care, though the exact cause and nature of the relationship cannot be determined from the survey results alone.

When asked whether different members of staff ever gave them conflicting information, there was no change in the proportion of patients who reported that this happened during their stay. Seven percent of patients said this happened 'often', and a further 26% stated that they had 'sometimes' received conflicting information. Two-thirds (66%) of patients stated that they did not receive conflicting information. These figures represent no significant change from 2007, but a significant decrease in the proportion of patients who were not given conflicting information, down from 69% in 2002.

Forty-four percent of respondents answered that their family or someone close to them 'definitely' had enough opportunity to talk to a doctor if they wanted to, with a further 40% reporting this 'to some extent'. These figures are not significantly different from 2007, but indicate an improvement since 2002, when 42% of respondents 'definitely' and a further 38% had enough opportunity 'to some extent'.

Overall, nearly 8 in 10 patients (78%) could find someone on the hospital staff to talk to about their worries and fears, either 'definitely' (41%) or 'to some extent' (37%). The proportion of patients who said they were 'definitely' able to find someone to talk to about their worries and fears increased from 40% in 2007 to 41% in 2008, but is not as high as 2005 and 2006 (both 42%) or 2002 (43%). When broken down by sex, a significantly larger proportion of men (44%) than women (40%) said they 'definitely' found someone to talk to about their fears. There was no clear pattern of findings among patients from different age groups.

Overall, 87% of patients who said that there were 'always or nearly always' enough nurses to care for them said that they could find someone on the hospital staff to talk to about their worries and fears either 'definitely' or 'to some extent'. This figure was 75% for those who said there were 'sometimes' enough nurses to care for them, and 53% for respondents who said there were 'rarely or never' enough nurses.

6.3 Privacy

Seventy percent of patients replied that they 'always' had enough privacy when discussing their condition or treatment, up from 69% in 2007. As in 2005, 2006 and 2007, a further 22% said they 'sometimes' had enough privacy. The proportion of patients who said they were not given enough privacy when discussing their condition or treatment decreased one percentage point since 2007 to 8%.

A higher proportion of patients (88%) were 'always' given enough privacy when being examined or treated than in 2007 (87%). A further 10% 'sometimes' had enough privacy (down from 11% in

2007) and only 2% of respondents did not feel they were given enough privacy when being examined or treated, an improvement from 2007.

The likely reason for this discrepancy in ratings of privacy during discussions, and examinations or treatments, is that the use of curtains to partition rooms containing multiple patients is effective visually (as it results in increased privacy during examinations), but comments made by staff and patients can sometimes be overheard by other patients and visitors. Alternatively, this discrepancy may reflect differences in provision: there may be more areas for private treatment compared with private spaces for discussing treatment.

When the results are broken down by gender, male and female patients judged levels of privacy differently, although this discrepancy was greater when rating privacy during discussions about the condition or treatment than during examinations or the treatment itself. During discussions about their condition or treatment, men (75%) were significantly more likely than women (67%) to report 'always' having enough privacy. This is the same pattern as in 2007 but the difference has reduced slightly. A significantly larger proportion of women (9%) then men (7%) correspondingly said that they were not given enough privacy during discussions. Men were also significantly more likely to say that they 'always' had enough privacy during treatment (90%) and examination than women were (87%), while a significantly larger proportion of women (2%) then men (1%) correspondingly said that they were not given enough privacy during examination or treatment.

There were significant differences in the proportion of patients who reported high standards of privacy between different age groups. The table below displays the proportions of patients who said they were 'always' given enough privacy, by age group:

Age group	When discussing their condition or treatment	When being examined or treated
16 - 35 years	61%	79%
36 - 50 years	63%	83%
51 - 65 years	69%	89%
65 years or over	75%	92%

Figure 13: Proportion of patients 'always' given enough privacy

6.4 Pain control

Two thirds of patients (66%) reported experiencing pain during their stay in hospital, the same proportion as in the 2007 survey but a smaller proportion than in 1001 (68%). Of these, 72% thought that the hospital staff 'definitely' did everything they could to help control their pain, a proportion comparable to the 2002 (72%), 2005 (73%), 2006 (72%) and 2007 (71%) surveys. A further 23% of patients felt their pain was controlled to some extent, the same proportion as in 2005, 2006 and 2007. Overall, there has been no significant change in the pain management reported by respondents since 2002.

A significantly larger proportion of male patients (75%) than female patients (70%) reported that staff 'definitely' did everything they could to control their pain. By comparison, female patients were significantly more likely (6%) male patients (5%) to report that staff did not do all they could to control their pain.

There were significant differences in the perception of pain control between different age groups. The table below displays the proportions of patients who said that hospital staff 'definitely' did all they could to help control their pain, by age group:

Figure 14: Hospital staff 'definitely' did all they could to help control my pain

Age group	
16 - 35 years	59%
36 - 50 years	67%
51 - 65 years	75%
65 years or over	76%

6.5 Overall

Over 9 out of 10 (93%) respondents rated their care as 'good', 'very good' or 'excellent', a significant increase from 2002 (91%), 2005, 2006 and 2007 (all 92%), and the highest proportion of patients reporting this since the survey programme began. There has also been continual improvement in patients rating the overall care in hospital as 'excellent', increasing from 38% in 2002, 40% in 2005, 41% in 2006, 42% in 2007 and 43% in 2008.

There was an improvement in the percentage of patients who said they were 'always' treated with respect and dignity, up from 78% in 2007 to 79% in 2008. The proportion of patients who felt that they were not treated with respect and dignity (3%) has declined since 2007.

The results show different patterns among patients from different age groups. The table below illustrates patients' ratings of respect and dignity, by age group:

Age group	l was always treated with respect and dignity	I was not treated with respect and dignity
16 - 35 years	66%	6%
36 - 50 years	72%	4%
51 - 65 years	81%	2%
65 years or over	84%	2%

Figure 15: Patients feelings about res	pect and dignity
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When the results are broken down by gender, a significantly larger proportion of men felt that they were 'always' treated with respect and dignity (83%) than women were (77%). The proportion of respondents who did not feel they were treated with respect and dignity also differed significantly between male and female patients was similar (2% and 3%, respectively). This is an improvement from 2007 when 3% of men and 4% of women felt that they were not treated with respect and dignity.

7 Operations and procedures

More than two-thirds (67%) of patients had an operation or procedure while in hospital, a decrease from previous years (69% in 2005, 68% in 2006 and 2007). As in 2007, responses regarding operations and procedures showed little change in the quality of the information they received compared with the 2005 and 2006 surveys.

Of those patients undergoing an operation or procedure in 2008, almost three-quarters (74%) had received a 'complete' explanation about what would be done during the operation or procedure, and a further 21% had received an explanation, 'to some extent'. This is unchanged from the past three years. More than four-fifths (82%) said that they were 'completely' informed about the risks and benefits of their procedure; a non significant increase from 2007 (81%), while another 15% said they were informed 'to some extent'. There was, however, a significant decrease in the proportion of patients who said they were not informed of the risks and benefits of their procedure, from 4% in 2007 to 3% in 2008. About three-quarters (76%) said they had their questions answered in a way they could 'completely' understand before their operation or procedure and a further 21% felt that their questions were answered 'to some extent', both unchanged from 2007. There was also a significant decrease from 4% in 2007 to 3% in 2007. There was also a significant decrease from 4% in 2007 to 3% in 2007.

Overall, 57% of patients said they were told how they would expect to feel after they had the operation or procedure, a non significant increase from 2007 (56%). A further 28% were told how they could expect to feel 'to some extent', unchanged in the last year. This is the question to which the largest proportion of patients (15%) answered that they were not informed, however this figure is an improvement from the proportion saying this in 2007 (16%).

Nearly nine in ten patients (87%) said they were given an anaesthetic to control their pain or help them sleep, the same proportion as in 2007. Levels of information provided to patients who were given an anaesthetic were very high: 84% of respondents stated that the anaesthetist or another member of staff explained how they would be put them to sleep or control their pain in a way they could 'completely' understand, the same proportion as reported this in 2006 and 2007. A further 11% received an explanation, to some extent. The number of patients who said they did not receive an explanation of how they would be put to sleep (4%) did not show a significant change from 2007 (5%).

Information about the results of patients' operations and procedures has not improved in 2008. Overall, 65% reported that a member of staff had 'completely' explained how the operation or procedure had gone in a way they could understand, while a further 23% said staff explained this 'to some extent'. More than one in ten patients (12%) said they were not informed of how their procedure had gone. None of these figures has changed since 2007. Patient reporting suggests that, consistent with previous years, hospital staff provide a significantly greater amount of information before the operation or procedure than they do following it.

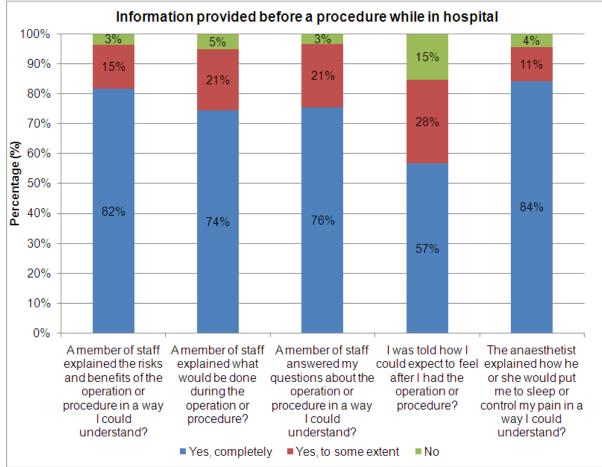


Figure 16: Information provided to patients about their operation or procedure while in hospital

8 Leaving hospital

8.1 Involvement in discharge decisions

More patients reported 'definitely' feeling involved in decisions about their discharge in 2008 (54%) than in 2007 (53%). Correspondingly fewer patients (16%) said that they did not feel involved, a decrease of one percentage point from 2007 (17%). The proportion who were involved 'to some extent' remained at 30%.

When the results are broken down by length of stay, patients who had short stays in hospital were most likely to report 'definitely' being involved in decisions about their discharge: 56% of those who stayed for one night and 55% of patients who stayed 2-5 nights. By comparison, patients who stayed for more than fifteen nights had the lowest proportion of respondents to say that they were 'definitely' involved in decisions about their discharge (46%). These results did not vary significantly between male and female patients.

8.2 Discharge delays

Previous surveys of adult inpatients in the NHS show that a considerable proportion said they experienced delays during their hospital discharge. Forty percent of patients in the 2008 survey said their discharge was delayed when they left hospital; a deterioration from 2007 (39%) and 2006 (38%). The length of delays reported have not changed significantly since 2007. Of those patients who had their discharge delayed:

- 17% were delayed up to one hour
- 29% were delayed between one and two hours
- 32% were delayed between two and four hours
- 21% were delayed more than four hours.

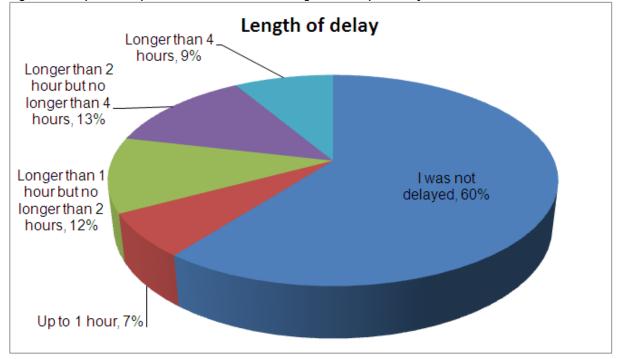


Figure 17: Proportion of patients who had their discharge from hospital delayed

Patients reported that the most common reason for experiencing a delay was having to wait for medicines to take home (60%), but another 17% said they were delayed because they needed to see a doctor before discharge and 9% because they had to wait for hospital transport. The remaining 14% of respondents were delayed because of 'something else'. Overall, there have been no significant change in these figures since the 2005 survey.

Waiting for medicines was the most common cause of delays of all duration, although it was more likely for patients waiting up to one hour (68%), dropping steadily to just under half of cases for those who waited longer than four hours (49%). Patients whose discharge was delayed for more than four hours were instead comparatively more likely to have waited to see the doctor (19%) than those whose delay was one hour or less (12%) or to have been waiting for an ambulance (11% and 8%, respectively).

When the results are broken down by age, the youngest patient group (aged 16 to 35 years) had the largest proportion of patients who said that they had a delayed discharge (43%), while those over 65 years were the least likely to report having experienced a delay (38%). Overall, 64% of patients aged 51 to 65 said they had to wait for medicines, compared to 56% of respondents aged 16 to 35, 61% of patients aged 36 to 50 and 60% of patients aged 65 years or over. The youngest patients (aged 16 to 35) were most likely to have been waiting to see the doctor (27%), and least likely to have been waiting for an ambulance (2%), while the oldest age group (patients aged over 65 years) were least likely to have waited to see the doctor (13%) but most likely to have been kept waiting for an ambulance (14%). A similar proportion of patients in all age groups gave 'something else' as the reason for delay.

8.3 Information about medicines

Patients discharged with medication to take home were asked about the information they received regarding its purpose, how to take it, and any side effects of the medicine.

Instructions both on how patients should take their medicine and why they were to take it were provided to most patients. There was no change since 2006 in the proportions of patients who received an explanation of the purpose of the medicines they were to take at home in a way they could understand. Over three-quarters of patients (76%) had received an explanation they 'completely' understood, while a further 16% said they were informed 'to some extent'. Overall, 8% of patients said they were not told the purpose of their medicines.

Similarly, over three-quarters (76%) of patients said they were 'definitely' told how to correctly take their medicine, a significant increase of less than one percentage point since 2007. A further 15% of patients reported having received this information 'to some extent', no change in the past year. However, 9% of patients said they were not told how to take their medicines in a way they could understand, no improvement since 2007.

The downward trend in the number of patients being informed of the side effects of their medicines was reversed this year, with improvements to information provision in evidence. Thirty-eight percent of patients taking medicines home said they were given a 'complete' explanation of the medication's possible side effects, an improvement from 2007 (36%) and 2006 (37%) but not as high as in 2002 (39%) and 2005 (40%). A further 18% of patients reported being informed of side effects 'to some extent', no change since 2005. A significantly smaller proportion (44%) of patients said that staff did not tell them about medication side effects for watch for when they went home than in 2007 (46%), although this figure indicates that nearly half of patients are not told this important information when they are discharged.

European Community Directive 2001/83¹ states that all medicines to be taken home by inpatients must contain written or printed instructions designed to be clear and understandable by patients. An improvement in the printed information provided to patients was seen in 2008, with 67% of respondents saying they were given complete and clear written or printed information about their take-home medicines, up from 66% in 2007, 65% in 2006 and 62% in 2005. There has been a statistically significant decrease of less than one percentage point in the proportion of respondents who said they were not given clear written or printed information about their medicines, remaining at 18% as in 2007 and 2006, but still an improvement on the 2005 figure of 20%.

8.4 Information about care at home

It is important that patients are given the information they need to manage their ongoing care after they are discharged. Patients should be informed of any danger signals they should be aware of, and know who to contact if they are concerned about their condition or treatment once they are at home. In many cases it is also important that a patient's family or friends receive the information they need to help care for the patient. In 2008 there have been significant improvements in the information hospitals provide about patients' care at home.

Information about danger signals has improved in the past year. Forty percent of respondents replied that a member of staff had 'completely' told them about danger signals they should watch

¹ European Community Directive 2001/83 EC (the provisions formerly in Directive 92/27 EEC).

out for after they went home, an increase from 2006 and 2007 (both 39%) but not as high as 2002 (41%). A correspondingly lower proportion of patients answered that they were not told about any danger signals, down two percentage points from 41% in 2007 to 39% in 2008. A further 21% were informed, 'to some extent', the same proportion as in the past three years. Three-quarters of patients (75%) said they were told by hospital staff who to contact if they were worried about their condition or treatment after they left hospital, up from 74% in 2007 but lower than in 2005 and 2006 (both 76%).

Information given to family members at discharge has also improved in the past year. Forty-four percent of respondents said that when leaving hospital their family or someone else close to them were 'definitely' given enough information they needed to help care for them, up from 43% in 2007 and 42% in 2006. A further 23% reported having received this information 'to some extent'. A smaller proportion of respondents (33%) said that they did not receive this information than in 2007 (35%) and 2006 (34%).

There were also improvements in the proportion of patients who reported having been given written or printed information about what they should or should not do after leaving hospital. Although receiving this information is not a requirement upon discharge, more than half of patients (63%) said that they had been given written or printed information, up from 61% in 2007.

8.5 Complaints

In 2008, nearly one in ten (9%) respondents were asked to give their views on the quality of their care, a significant from 2007 (7%), 2006 (7%) and than 2005 (6%).

Thirty-eight percent of respondents (38%) said that they saw posters or leaflets while in hospital explaining how to complain about the care they had received, an increase from 37% in 2007. Overall, 8% of respondents stated that they wanted to complain about the care they received in hospital, an increase of one percentage point since 2007 (7%).

Interestingly, patients who reported that they wanted to complain about the care they had received were in fact less likely to report having seen posters or leaflets telling them how to do this (24%) than were patients who did not want to complain (39%). This same pattern was observed in 2007. A smaller proportion of patients who said that they were asked to give their views on the quality of their care said they wanted to complain about the care they received (8%) than did patients who were not asked to give feedback on their care (9%).

Looking at the results by sex, a significantly larger proportion of women (8%) than men (7%) said they wanted to complain about their care. Male respondents were significantly more likely (10%) than females (8%) to report having been asked to give their views on the quality of their care. Men were also significantly more likely to report having seen posters or leaflets giving information about how to complain than women were (42% and 34%, respectively).

When the results are broken down by age, there was greater variation in the proportion of patients who wanted to complain about their care, and who saw posters or leaflets explaining how to complain about their care, than in the proportion of patients who were asked to give feedback on the quality of their care:

Figure 18:	Patient	experiences	of host	oital feedback
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Age group	l was asked to give my views on the quality of my care	I wanted to complain about the care I received in hospital	I saw posters or leaflets explaining how to complain about my care
16 - 35 years	10%	14%	35%
36 - 50 years	10%	10%	42%
51 - 65 years	10%	7%	43%
65 years or over	8%	6%	34%

When the results are broken down by length of stay it can be seen that the longer a patient stayed in hospital, the greater the likelihood that they wanted to complain about the care they had received. Nearly twice as many patients who stayed for longer than 15 nights said they wanted to complain about the care they received (13%) than patients admitted for a single overnight stay or who stayed for 2-5 nights (both 7%). Similarly, a higher proportion of the longest-staying patients (14%) reported having been asked to give their views on the quality of their care than patients admitted for a single night (7%).

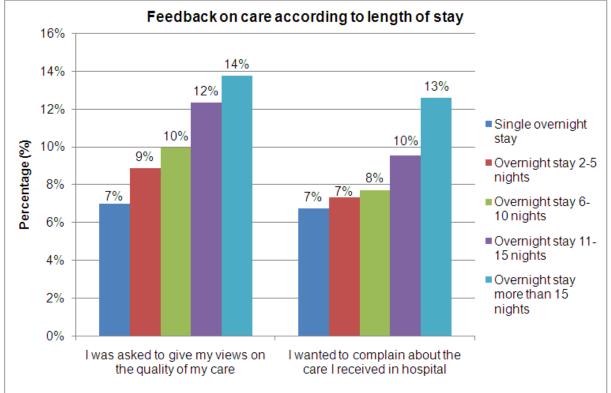
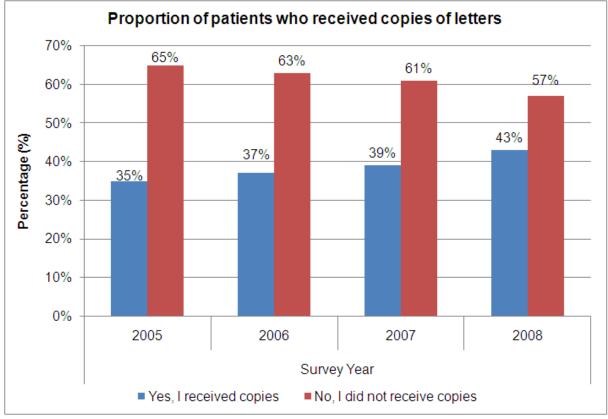


Figure 19: Involvement and complaints by patients with different lengths of stay

8.6 Copies of correspondence

The NHS Plan¹ states that "patients often do not know why they are being referred, or what is being said about them". To improve patient's understanding about their treatment, the NHS Plan said that "letters between clinicians about an individual patient's care will be copied to the patient as of right". The proportion of patients receiving copies of letters sent between hospital doctors and their own family doctor (GP) continues to improve, with 43% of patients in 2008 saying that they received these letters, an increase from 35% in 2005 to 37% in 2006 and 39% in 2007.





¹ Secretary of State for Health. *The NHS Plan*, page 88. London: the stationery office, 2000.

Appendices

Appendix 1: About the national NHS patient survey programme

The national NHS patient survey programme is the longest established, and one of the largest, patient survey programmes in the world. The Care Quality Commission assumed responsibility for the programme in April 2009, having taken over many of the functions of the Healthcare Commission. This responsibility covers funding the design, development and co-ordination of the surveys and overseeing implementation of the programme. The survey programme provides a unique opportunity to monitor patients' experiences of healthcare and is an important part of the Commission's assessment of NHS trusts.

The national NHS patient survey programme aims to:

- Provide feedback from patients to healthcare organisations which can be used locally for quality improvement
- Gather information about the experiences of people using services to inform performance assessments and Care Quality Commission inspections and reviews at a local level
- Assess the performance of healthcare providers and monitor the experiences of patients at a
 national level
- Allow healthcare organisations to compare their results so that best practice can be shared.

During 2008, the Healthcare Commission carried out four national surveys asking patients across England about their experiences of acute inpatient services, the emergency department, non urgent (Category C) ambulance services, and community mental health services. The questionnaire and methodology used in this inpatient survey was developed by the Picker Institute.

The results of the survey and data on patients' experiences in each NHS trust are available in detailed reports and can be found on the Care Quality Commission website at http://www.cqc.org.uk

How was the 2008 inpatient questionnaire developed?

Instruments to measure patients' experience were originally developed by researchers at Harvard Medical School with funds from the Picker/Commonwealth Program for Patient-Centred Care, a programme established in 1987 under the auspices of the Commonwealth Fund of New York¹. Patients were asked to report in detail on their experience of a particular provider at a specific point in time by responding to questions about whether or not certain processes or events occurred during the course of a specific episode of care². Responses to these types of questions are intended to be factual rather than evaluative and they are designed to help healthcare organisations to pinpoint problems more precisely³.

In 2002, Picker Institute Europe carried out further interviews and focus groups to adapt the Picker questionnaire for the English National Survey Programme. Surveys were also organised to determine patients' top priorities. The questionnaire was further refined in 2004, 2005, 2006, 2007

¹ Beatrice DF, Thomas CP, Biles B. Grant making with an impact: the Picker / Commonwealth patient-centred care program. *Health Affairs* 1998; 17:236-44.

² Cleary PD and Edgman-Levitan S. Health care quality: incorporating consumer perspectives. *Journal of the American Medical Association* 1997; 278:608-12.

³ Secretary of State for Health. The NHS Plan. London: the stationery office, 2000.

and 2008 to incorporate policy changes and to ensure that it included the questions that were the most useful in designing quality improvements. The full reports of the development of the 2002 inpatient survey, and of its refinement for the 2004, 2005, 2007 and 2008 surveys, are available on the www.nhssurveys.org website^{12 3 45}.

Sampling

This survey was carried out in 165 English Acute NHS trusts with adult inpatients. Each trust identified a list of 850 eligible patients who had been consecutively discharged leading up to the last day of June, July, or August 2008. Patients were eligible if they were 16 years or older, had at least one overnight stay in hospital, and were not maternity patients, private patients, or psychiatric patients.

Comparisons between years

The Department of Health commissioned the first national inpatient survey in 2002 and the Healthcare Commission repeated this survey in 2004, 2005, 2006, 2007 and 2008. This report summarises the key findings of the 2008 inpatient survey and highlights differences with the 2002, 2005, 2006 and 2007 results. The results from the 2004 survey are not included in comparisons due to differences in the sampling methodology ie only patients aged 18 years and over were included in the 2004 survey as separate survey of children and young people (aged 0-17 years) took place that year.

The 2002, 2005, 2006, 2007 and 2008 survey results were compared on all of the 27 questions that were directly comparable (i.e. those questions that were unchanged between the three surveys, or for which response options could be matched up in a way that allowed them to be compared). Further comparisons were made between 8 questions asked only in 2007 and 2008. Z-tests were used for significance and all differences that are noted in this report are significant using α =0.05. Bonferroni correction was used for all multiple comparisons (ie where data was available for all four years).

Questionnaire and method

The questionnaire was composed of closed questions except for a final section that invited respondents to comment in their own words on the aspects that were particularly good about their care, and the aspects that could be improved. This information is available for trusts to use, but is not submitted to the Co-ordination Centre as part of the national patient survey programme.

¹ Reeves R. et al. *Development and Pilot Testing of Questionnaires for use in the Acute NHS Trust Inpatient Survey Programme*, 2002. http://www.nhssurveys.org/Filestore/documents/DevelopmentInpatientQuestionnaire.pdf. Oxford, Picker Institute Europe.

² Reeves R. *Preparation of Core Questionnaire for inpatient survey 2004*, 2004. http://www.nhssurveys.org/Filestore/documents/Amendments_inpatient_survey.pdf. Oxford, Picker Institute Europe.

³ Boyd J, Wood D and Reeves R. *Development and pilot testing of the questionnaire for use in acute adult inpatients survey*, 2005. http://www.nhssurveys.org/Filestore/documents/Redevelopment_report_of_the_acute_adult_inpatients_survey_2005.pdf. Oxford, Picker Institute Europe

⁴ Boyd J. *The development report for the 2007 inpatients survey,* 2007. http://www.nhssurveys.org/Filestore/documents/The_development_report_for_the_2007_Inpatients_survey_v 1.pdf. Oxford, Picker Institute Europe

⁵ Garratt, E. The development report for the 2008 inpatients survey, 2008. http://www.nhssurveys.org/Filestore//documents/The_development_report_for_the_2008_Inpatients_survey_ v1.pdf. Oxford, Picker Institute Europe

Patients selected for the sample were sent a postal questionnaire and a covering letter. Up to two reminder letters were sent to non-respondents.

Calculation of trust-based national averages for responses to all questions

The weighted percentages presented in this report were calculated so that each trust had an equal influence on the final estimate. They therefore represent the results from the "average trust". If unweighted percentages had been used, the trusts' influence would not have been equal, since some trusts had a higher response rate than others and would therefore contribute more to any percentage calculated in this way. The effect of this would have been to skew the national averages towards the averages for the trusts with the greatest response rates.

This method ensures that all trusts had the same influence on the percentages, regardless of their response rate. That is, the proportion of responses to each response option for each individual question is calculated within each trust. The overall national percentage for a given response is then calculated as a mean of all the trusts' proportions.

This method provides a figure that represents every trust equally regardless of differential response rates.

The only exceptions to this approach were in the figures for demographics (sex, age, personal health evaluation, any disability and its effect on daily living, and ethnic group). These are given as simple percentages, as it is more appropriate to present the real percentages of sampled patients and respondents, rather than average figures.

Appendix 2: Who took part in the survey?

Questionnaires were sent to 139,857 patients and completed questionnaires were received from 72,584 respondents. This represents an adjusted response rate of 53.5% when undelivered questionnaires, ineligible patients, and deceased patients have been accounted for (adjusted response rates vary between trusts from 33.5% to 74.7%).

This represents a slight decrease from the 2007 survey, which had an adjusted response rate of 56.1% (varying between trusts from 33.7% to 78.4%), following the downward trend in response rates from 58.7% in 2006, 59.3% in 2005, 63.3% in 2004 and $64\%^1$ in 2002.

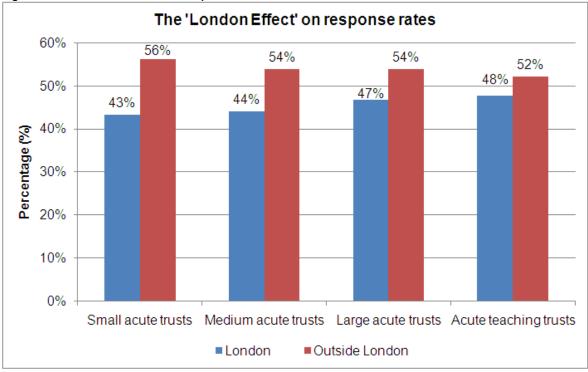
	Number	Percent
Returned useable questionnaire	72584	51.9
Returned undelivered or pt moved house	1849	1.3
Patient died	2096	1.5
Too ill, opted out or returned blank questionnaire	9313	6.7
Patient not eligible to fill in questionnaire	251	0.2
Questionnaire not returned - reason not known	53764	38.4

Outcome of sending questionnaire

Orthopaedic and acute specialist trusts had the highest average response rates for the survey (69.3% and 61.0% respectively), and London-based acute trusts had the lowest (averaging 44.3%). London-based acute trusts also had significantly lower response rates than those outside London (9.9 percentage points lower for all non-teaching London trusts), although this difference was greater in small acute trusts (12.8 percentage points) than in medium (9.7 percentage points) or large trusts (7.1 percentage points). Please notes these response rates are not weighted for the demographic composition of the sample and much of the effect of reduced response rates are due to the very high levels of Black and minority ethnic (BME) groups present in London which have a lower mean response rate than white patients.

¹ Information to one decimal place not available for 2002 data.

Figure 21: The 'London Effect' on response rates



In 2008, the adjusted response rate for the inpatient survey has decreased by 2.6 percentage points to 53.5%. This decline in response rate is the same magnitude as that seen from 2006 to 2007 (from 58.7% to 56.1%)

Overall, 11 trusts had a decreased response rate of more than one percentage point in the 2008 survey (but as high as a 14.3 percentage point decrease), 23 trusts remained unchanged and 27 trusts had an increased response rate of more than one percentage point (up to an 5.8 percentage point increase).

Of all those patients who returned completed questionnaires (these figures are provided in the tables in Appendix 6):

- 54.0% were women
- 9.0% were aged 16-35 years, 15.1% 36-50 years, 26.9% were 51-65 years, 49.0% were 66 and over
- 94.3% were White, 2.6% Asian or Asian British, 1.9% Black or Black British, 0.7% were of mixed race, 0.2% were Chinese and 0.3% were from another ethnic group
- 56.3% of patients rated their own health as good, very good or excellent in the last four weeks, 43.7% as very poor, poor or fair.

Long-term conditions

Overall, approximately 6 in 10 (61%) respondents said they have a long-standing health problem or disability, the same proportion as in 2007. Two-thirds of respondents (66%) with a long-standing condition answered that it caused them difficulty with at least one of the everyday activities that we listed, a smaller proportion than in 2007 (74%). The questions about long-standing conditions changed in 2007 so comparisons prior to this are not possible.

The questions list a range of conditions and the effect these conditions have on activities carried out by the respondent. Respondents were able to select more than one option to both questions. The most frequent conditions indicated by respondents were having a long-standing illness (for example, cancer, HIV, chronic heart disease, diabetes, etc) (31%) or a long-standing physical condition (30%). Impairments to hearing (12%) and sight (4%), learning disabilities (1%) and mental health conditions (4%) were less common. Only 39% of respondents said they did not have a long-standing condition, the same proportion as in 2007.

Of those respondents in 2008 who reported having a long-standing condition, the most common response selected to this question was that the condition(s) caused them difficulty with "everyday activities that people your age can usually do", chosen by 54% of respondents. This option covers a very broad range of problems; more specifically, 22% cited problems with access to buildings, streets and vehicles and 17% with communicating and socialising. Problems at work, in education or training (14%), reading or writing (11%) and people's attitudes towards them (10%) were less common. Sixteen percent of patients with a long-standing condition reported that it caused them problems with other activities, while only one-third (34%) reported that their long-standing condition did not cause them difficulty with any of the activities listed.

The proportion of missing responses to this question (4%) was lower than last year (5%) and indicates that most respondents found at least one response option in this question to describe an activity causing them difficulty.

Demographics of respondents and non-respondents

It is important to compare the demographic characteristics of the respondents and nonrespondents to the survey because respondents to a survey may not be representative of all patients that use a particular NHS trust. The sampling strategy is designed to approximate the population of patients at each participating NHS trust (these figures are provided in tables in Appendix 5).

Gender and age

The gender of the patient was known for 100% of patients included in the sample. After patients who had died during the survey period, those who were ineligible, or whose questionnaires were returned undelivered were removed from the sample, completed questionnaires were received from 52.9% of male and 54.0% of female patients in the sample.

Age information was available for 100% of the sample. Older patients were more likely to respond than younger ones and useable questionnaires were returned by:

- 30.9% of 16 to 35 year olds
- 46.1% of 36 to 50 year olds
- 63.0% of 51 to 65 year olds
- 59.6% of patients aged 66 years or over.

As in the last three survey years, the highest response rates were for female patients aged 51 to 65 (66.2%) then male patients aged 66 years or older (63.1%). The lowest response rates were for men aged 16 to 35 (24.9%) and women aged 16 to 35 (35.3%).

Ethnic group

Hospital recording of patients' ethnic group was available for 94.8% of the sample, a large improvement from 87.5% in 2007, 82.3% in 2006 and 78.5% in 2005. Response rates varied by ethnic group and useable questionnaires were returned by:

- 55.0% of white patients
- 41.4% of patients of mixed ethnic groups
- 36.2% of Asian or Asian British patients
- 39.6% of Black or Black British patients
- 48.5% of Chinese patients
- 39.1% of patients reported to belong to "any other" ethnic group
- 53.1% of patients whose ethnic group was not stated in the sample information.

Length of Stay

It is becoming increasingly common for patients comprising the sample to have had only a single overnight stay (31.6%) compared with 2005 (26.2%), 2006 (29.4%) and 2007 (30.7%). Again, over two-thirds stayed five nights or less (69.1%), a slight increase from 2007 (68.4%) and 2006 (67.7%). Overall, 15.3% of patients stayed 11 nights or longer, the same proportion as in 2007. The longest stay was 588 days.

As in 2007, patients who stayed between six and ten nights were most likely to respond to the survey (58.5% response rate in 2008, 60.5% in 2007), while those who stayed more than 15 nights were least likely (45.2%) to respond.

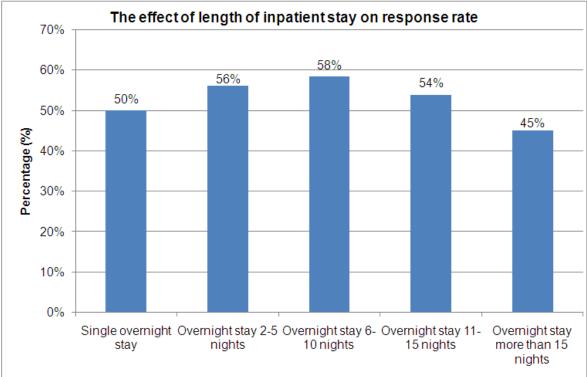


Figure 22: The effect of the length of stay in hospital upon response rate

Main Specialty

The main specialty reflects the specialty code of the consultant who was managing the patient's care immediately prior to discharge. This will not always capture the patient's whole journey, as they may move around the hospital trust depending on their clinical situation and needs. Most patients were covered by one of three main specialties: general medicine (23.5%), general surgery (17.1%), or trauma and orthopaedics (14.8%). Other departments represented by large numbers of patients in the sample were gynaecology (6.4%), geriatric medicine (6.0%), cardiology (5.3%) urology (5.1%), and ENT $(2.9\%)^1$.

¹ In 2008, 2.9% of patients were treated under the main specialty of "Accident and Emergency", the same proportion as those treated under ENT. The results for ENT patients are discussed here because it allows for year-on-year comparisons that are not possible for A&E patients.

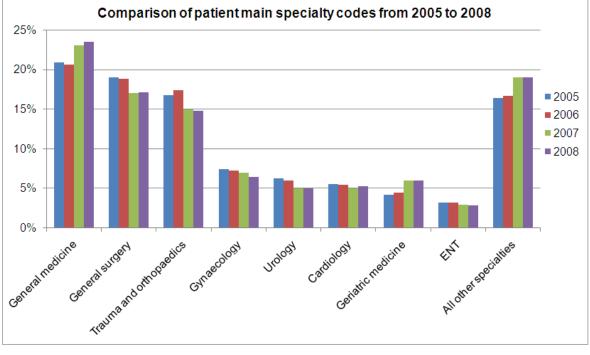


Figure 23: Proportion of patients in each main specialty codes compared to previous years (sample information)

Patients discharged from the specialties of urology (62.1%), trauma and orthopaedics (62.0%) and cardiology (61.9%), were the most likely to respond to the survey, while response rates were lowest from those treated by the specialties of general medicine (47.5%) and geriatric medicine (41.5%).

Appendix 3: Tables of results

Please note, due to rounding, the sum of some responses may not equal 100%.

Admission to Hospital

Q1 Was your most recent hospital stay planned in advance or an emergency?

National average %
55.2%
42.1%
2.7%
70020
2564

Answered by all

Q1_v2 Was your most recent hospital stay planned in advance or an emergency?

	National average %
Emergency or urgent	56.7%
Waiting list or planned admission	43.3%
Total specific responses	68171
Something else	1849
Missing responses	2564

Answered by all

Q2 When you arrived at the hospital, did you go to the Emergency Department?

	National average %
Yes	88.2%
No	11.8%
Total specific responses	39793
Missing responses	1255

Answered by all who were admitted for an emergency, urgent or other reason

Q3 While you were in the Emergency Department, how much information about your treatment or condition was given to you?

	National average %
Not enough	16.9%
Right amount	73.0%
Too much	0.6%
I was not given any information about my treatment/condition	9.5%
Total specific responses	31960
Don't know / Can't remember	3932
Missing responses	973

Answered by all who went to the Emergency Department upon arrival

Q4 Were you given enough privacy when being examined or treated in the Emergency Department?

	National average %	
Yes, definitely	76.2%	
Yes, to some extent	21.6%	
No	2.2%	
Total specific responses	34412	
Don't know / Can't remember	1847	
Missing responses	709	

Answered by all who went to the Emergency Department upon arrival

Q5 Following arrival at the hospital, how long did you wait before being admitted to a bed on a ward?

	National average %
Less than 1 hour	21.7%
At least 1 hour but less than 2 hours	17.7%
At least 2 hours but less than 4 hours	24.8%
At least 4 hours but less than 8 hours	22.0%
8 hours or longer	6.2%
I did not have to wait	7.6%
Total specific responses	33543
Don't know / Can't remember	2709
Missing responses	896

Answered by all who went to the Emergency Department upon arrival

Q6 When you were referred to see a specialist, were you offered a choice of hospital for your first hospital appointment?

	National average %
Yes	33.2%
No	66.8%
Total specific responses	32233
Don't know / Can't remember	1697
Missing responses	1551

Answered by all whose most recent admission to hospital was waiting list or planned in advance

Q7 Who referred you to see a specialist?

	National average %
A doctor from my local general practice	71.4%
Any other doctor or specialist	24.5%
A practice nurse or nurse practitioner	1.5%
Any other health professional (for example, a dentist, optometrist or physiotherapist)	2.6%
Total specific responses	32853
Don't know / Can't remember	615
Missing responses	1986

Answered by all whose most recent admission to hospital was waiting list or planned in advance

Q8 Overall, from the time you first talked to this health professional about being referred to a hospital, how long did you wait to be admitted to hospital?

	National average %
Up to 1 month	29.2%
1 to 2 months	25.5%
3 to 4 months	23.2%
5 to 6 months	9.6%
More than 6 months	12.6%
Total specific responses	30864
Don't know / Can't remember	1807
Missing responses	2602

Answered by all whose most recent admission to hospital was waiting list or planned in advance

Q9 How do you feel about the length of time you were on the waiting list before your admission to hospital?

	National average %
I was admitted as soon as I thought was necessary	75.9%
l should have been admitted a bit sooner	15.9%
l should have been admitted a lot sooner	8.2%
Total specific responses	32907
Missing responses	2442

Answered by all whose most recent admission to hospital was waiting list or planned in advance

Q10 Were you given a choice of admission dates?

	National average %
Yes	30.3%
No	69.7%
Total specific responses	32473
Don't know / Can't remember	872
Missing responses	2035

Answered by all whose most recent admission to hospital was waiting list or planned in advance

Q11 Was your admission date changed by the hospital?

	National average %	
No	79.8%	
Yes, once	16.8%	
Yes, 2 or 3 times	3.2%	
Yes, 4 times or more	0.3%	
Total specific responses	33382	
Missing responses	2013	

Answered by all whose most recent admission to hospital was waiting list or planned in advance

Q12 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?

	National average %
Yes, definitely	11.2%
Yes, to some extent	19.4%
No	69.3%
Total specific responses	70378
Missing responses	2206
Answered by all	

The hospital and ward

Q13 While in hospital, did you ever stay in a critical care area (Intensive Care Unit, High Dependency Unit or Coronary Care Unit?

	National average %
Yes	20.8%
No	79.2%
Total specific responses	67451
Don't know / Can't remember	3115
Missing responses	2018

Answered by all

Q14 When you were first admitted to a bed on a ward, did you share a sleeping area, for example a room or bay, with patients of the opposite sex?

	National average %
Yes	23.6%
No	76.4%
Total specific responses	69855
Missing responses	1853
Anowarad by all	

Answered by all

Q14_v2 Proportions of emergency and planned admission patients who shared a room or bay with patients of the opposite sex when they first arrived at hospital (critical care patients excluded)

	Emergency patients %	Planned admission patients %
Yes	29.2%	9.5%
No	70.8%	90.5%
Total specific responses	25556	23442

Answered by all patients who did not stay in a Critical Care Area

Q15 When you were first admitted, did you mind sharing a sleeping area, for example a room or bay, with patients of the opposite sex?

	National average %
Yes	32.5%
No	67.5%
Total specific responses	16383
Missing responses	431

Answered by all who shared a sleeping area when first admitted and who did not stay in a Critical Care Area

Q15_v2 Proportions of emergency and planned admission patients who minded sharing a room or bay with	۱
patients of the opposite sex after they moved hospital ward (or wards) (critical care patients excluded)	

	Emergency patients %	Planned admission patients %
Yes	37.0%	28.0%
No	63.0%	72.0%
Total specific responses	7467	2193

Answered by all who shared a sleeping area when first admitted and who did not stay in a Critical Care Area

Q16 During your stay in hospital, how many wards did you stay in?

	National average %
1	64.5%
2	27.8%
3 or more	7.7%
Total specific responses	70096
Don't know / Can't remember	779
Missing responses	1709

Answered by all

Q16_v2 Proportions of emergency and planned admission patients who and how many wards they stayed in? (Critical care area patients excluded)

		During your stay in hospital, how many wards did you stay in?		
		1	2	3 or more
Was your most recent hospital stay planned in advance or an emergency?	Emergency or urgent	58.7%	33.7%	7.5%
	Waiting list or planned in advance	85.7%	12.8%	1.5%
	Total specific responses	35572	11671	2279

Answered by all patients with known route of admission and who did not stay in a Critical Care Area

Q17 After you moved to another ward (or wards), did you ever share a sleeping area, for example a room or bay, with patients of the opposite sex?

	National average %
Yes	16.6%
No	83.4%
Total specific responses	24387
Missing responses	632

Answered by all who stayed in two or more wards

Q17_v2 Proportions of emergency and planned admission patients who shared a room or bay with patients of
the opposite sex after they moved hospital ward (or wards) (critical care patients excluded)

	Emergency patients %	Planned admission patients %
Yes	13.1%	8.9%
No	86.9%	91.1%
Total specific responses	10248	3331

Answered by all who stayed in two or more wards and who did not stay in a Critical Care Area

Q18 After you moved, did you mind sharing a sleeping area, for example a room or bay, with patients of the opposite sex? (critical care patients excluded)

	National average %
Yes	41.3%
No	58.7%
Total specific responses	938
Missing responses	27

Answered by all who shared a sleeping area after moving wards and who did not stay in a Critical Care Area

Q18_v2 Proportions of emergency and planned admission patients who minded sharing a room or bay with patients of the opposite sex after they moved hospital ward (or wards) (critical care patients excluded)

	Emergency patients %	Planned admission patients %
Yes	42.8%	36.4%
No	57.2%	63.6%
Total specific responses	727	151

Answered by all who shared a sleeping area after moving wards and who did not stay in a Critical Care Area

Q19 While staying in the hospital, did you ever use the same bathroom or shower area as patients of the opposite sex?

	National average %
Yes	29.6%
Yes, because it had special bathing equipment that I needed	1.9%
No	68.5%
Total specific responses	61610
l did not use a bathroom or shower	4088
Don't know / Can't remember	3857
Missing responses	2153

Answered by all

Q19_v2 While staying in the hospital, did you ever use the same bathroom or shower area as patients of the opposite sex? (Critical care patients excluded) – sub-analysis by demographics

		While staying in the hospital, did you ever use the same bathroom or shower area as patients of the opposite sex?	
		Yes	No
	Male	28.2%	71.8%
	Female	27.7%	72.3%
Gender of respondent*	Total specific responses	19263	25887
	16-35 years	30.7%	69.3%
	36-50 years	32.3%	67.7%
	51 – 65 years	30.7%	69.3%
	66 years and over	24.0%	76.0%
Age group of respondent**	Total specific responses	12601	32549
	Emergency or urgent	34.0%	66.0%
	Waiting list or planned	21.8%	78.2%
Route of admission***	Total specific responses	21697	20986

* Based on respondents who answered Q19 (sharing bathroom areas) and had a known gender, and who did not stay in a Critical Care Area

** Based on respondents who answered Q19 (sharing bathroom areas) and had a known age, and who did not stay in a Critical Care Area

*** Based on respondents who answered both Q1 (route of admission) and Q19 (sharing bathroom areas), and who did not stay in a Critical Care Area

Q20 Were you ever bothered by noise at night from other patients?

	National average %
Yes	39.2%
No	60.8%
Total specific responses	70950
Missing responses	1634

Answered by all

Q21 Were you ever bothered by noise at night from hospital staff?

	National average %
Yes	20.5%
No	79.5%
Total specific responses	71025
Missing responses	1559

Answered by all

Q22 In your opinion, how clean was the hospital room or ward that you were in?

	National average %
Very clean	60.0%
Fairly clean	35.2%
Not very clean	4.0%
Not at all clean	0.9%
Total specific responses	71590
Missing responses	994

Answered by all

Q23 How clean were the toilets and bathrooms that you used in hospital?

	National average %
Very clean	51.9%
Fairly clean	39.1%
Not very clean	7.0%
Not at all clean	1.9%
Total specific responses	69617
l did not use a toilet or bathroom	1977
Missing responses	990
A nowarad by all	

Answered by all

Q23_v2 How clean were the toilets and bathrooms that you used in hospital?

	National average %
Very clean	50.5%
Fairly clean	38.0%
Not very clean	6.8%
Not at all clean	1.9%
I did not use a toilet or bathroom	2.8%
Total specific responses	71594
Missing responses	990
A nowarad by all	

Answered by all

.....

Q24 Did you feel threatened during your stay in hospital by other patients or visitors?

	National average %
Yes	3.6%
No	96.4%
Total specific responses	71544
Missing responses	1040

Answered by all

Q25 Did you have somewhere to keep your personal belongings whilst on the ward?

	National average %
Yes, and I could lock it if I wanted to	30.9%
Yes, but I could not lock it	65.1%
No	4.1%
Total specific responses	63041
l did not take any belongings to hospital	6666
Don't know / Can't remember	1442
Missing responses	1435

Answered by all

Q26 How would you rate the hospital food?

	National average %
Very good	20.7%
Good	36.2%
Fair	29.6%
Poor	13.5%
Total specific responses	68842
l did not have any hospital food	2694
Missing responses	1048

Answered by all

.....

Q26_v2 How would you rate the hospital food?

	National average %
Very good	19.9%
Good	34.8%
Fair	28.4%
Poor	13.0%
l did not have any hospital food	3.9%
Total specific responses	71536
Missing responses	1048

Answered by all

Q27 Were you offered a choice of food?

	National average %
Yes, always	78.3%
Yes, sometimes	15.6%
No	6.1%
Total specific responses	70501
Missing responses	2083

Answered by all

Q28 Did you get enough help from staff to eat your meals?

	National average %
Yes, always	63.0%
Yes, sometimes	18.8%
No	18.2%
Total specific responses	21079
I did not need help to eat meals	49250
Missing responses	2255

Answered by all

Q28_v2 Did you get enough help from staff to eat your meals?

	National average %
Yes, always	19.0%
Yes, sometimes	5.7%
No	5.5%
I did not need help to eat meals	69.8%
Total specific responses	70329
Missing responses	2255

Answered by all

Doctors

Q29 When you had important questions to ask a doctor, did you get answers that you could understand?

	National average %
Yes, always	67.7%
Yes, sometimes	26.9%
No	5.4%
Total specific responses	64722
I had no need to ask	6725
Missing responses	1137
Answered by all	

Q30 Did you have confidence and trust in the doctors treating you?

	National average %
Yes, always	80.5%
Yes, sometimes	16.5%
No	3.0%
Total specific responses	71465
Missing responses	1119

Answered by all

Q31 Did doctors talk in front of you as if you weren't there?

.....

	National average %
Yes, often	6.0%
Yes, sometimes	21.8%
No	72.1%
Total specific responses	71292
Missing responses	1292
Answered by all	

Q32 As far as you know, did doctors wash or clean their hands between touching patients?

	National average %
Yes, always	73.6%
Yes, sometimes	18.1%
No	8.3%
Total specific responses	45651
Don't know / Can't remember	25757
Missing responses	1176

Answered by all

Nurses

Q33 When you had important questions to ask a nurse, did you get answers that you could understand?

	National average %
Yes, always	66.4%
Yes, sometimes	29.1%
No	4.6%
Total specific responses	64282
I had no need to ask	7349
Missing responses	953

Answered by all

Q34 Did you have confidence and trust in the nurses treating you?

	National average %
Yes, always	74.7%
Yes, sometimes	22.0%
No	3.3%
Total specific responses	71686
Missing responses	898

Answered by all

Q35 Did nurses talk in front of you as if you weren't there?

	National average %
Yes, often	4.9%
Yes, sometimes	16.9%
No	78.1%
Total specific responses	71437
Missing responses	1147

Answered by all

Q36 In your opinion, were there enough nurses on duty to care for you in hospital?

	National average %
There were always or nearly always enough nurses	58.0%
There were sometimes enough nurses	31.2%
There were rarely or never enough nurses	10.9%
Total specific responses	71444
Missing responses	1140
Answered by all	

Answered by all

Q37 As far as you know, did nurses wash or clean their hands between touching patients?

	National average %
Yes, always	76.1%
Yes, sometimes	19.7%
No	4.2%
Total specific responses	54789
Don't know / Can't remember	16712
Missing responses	1083

Answered by all

.....

Your care and treatment

Q38 Sometimes in a hospital, a member of staff will say one thing and another will say something quite different. Did this happen to you?

	National average %
Yes, often	7.4%
Yes, sometimes	26.5%
No	66.1%
Total specific responses	71264
Missing responses	1320

Answered by all

Q39 Were you involved as much as you wanted to be in decisions about your care and treatment?

	National average %
Yes, definitely	52.4%
Yes, to some extent	37.1%
No	10.5%
Total specific responses	70991
Missing responses	1593
Anowarad by all	

Answered by all

Q40 How much information about your condition or treatment was given to you?

	National average %
Not enough	20.6%
The right amount	78.6%
Too much	0.8%
Total specific responses	71168
Missing responses	1416

Answered by all

.....

Q41 If your family or someone else close to you wanted to talk to a doctor, did they have enough opportunity to do so?

National average %
43.7%
40.0%
16.3%
48706
7503
11982
2546
1847

Answered by all

Q42 Did you find someone on the hospital staff to talk to about your worries and fears?

National average %
41.1%
37.0%
21.9%
43435
27650
1499

Answered by all

Q43 Were you given enough privacy when discussing your condition or treatment?

National average %
70.0%
21.8%
8.2%
70521
2063

Answered by all

Q44 Were you given enough privacy when being examined or treated?

	National average %
Yes, always	88.3%
Yes, sometimes	10.0%
No	1.7%
Total specific responses	71381
Missing responses	1203
Answered by all	

Answered by all

Pain

Q45 Were you ever in any pain?

	National average %
Yes	66.2%
No	33.8%
Total specific responses	69906
Missing responses	2678

Answered by all

Q46 Do you think the hospital staff did everything they could to help control your pain?

.....

	National average %
Yes, definitely	71.8%
Yes, to some extent	22.6%
No	5.6%
Total specific responses	46937
Missing responses	664

Answered by all who experienced pain

Q47 How many minutes after you used the call button did it usually take before you got the help you needed?

	National average %
0 minutes/ right away	16.9%
1-2 minutes	38.7%
3-5 minutes	27.8%
More than 5 minutes	14.9%
I never got help when I used the call button	1.6%
Total specific responses	42026
I never used the call button	27847
Missing responses	2711
Answered by all	2111

Answered by all

Operations or procedures

Q48 During your stay in hospital, did you have an operation or procedure?

	National average %
Yes	66.9%
No	33.1%
Total specific responses	69589
Missing responses	2995

Answered by all

Q49 Beforehand, did a member of staff explain the risks and benefits of the operation or procedure in a way you
could understand?

	National average %
Yes, completely	81.6%
Yes, to some extent	14.9%
No	3.5%
Total specific responses	46809
l did not want an explanation	861
Missing responses	440

Answered by all who had an operation or procedure

Q50 Beforehand, did a member of staff explain what would be done during the operation or procedure?

	National average %
Yes, completely	74.4%
Yes, to some extent	20.6%
No	5.0%
Total specific responses	46454
l did not want an explanation	1125
Missing responses	548

Answered by all who had an operation or procedure

Q51 Beforehand, did a member of staff answer your questions about the operation or procedure in a way you could understand?

	National average %
Yes, completely	75.5%
Yes, to some extent	21.1%
No	3.4%
Total specific responses	41401
l did not have any questions	6157
Missing responses	807

Answered by all who had an operation or procedure

Q52 Beforehand, were you told how you could expect to feel after you had the operation or procedure?

	National average %
Yes, completely	56.7%
Yes, to some extent	27.9%
No	15.4%
Total specific responses	47314
Missing responses	957

Answered by all who had an operation or procedure

Q53 Before the operation or procedure, were you given an anaesthetic or medication to put you to sleep or control your pain?

	National average %
Yes	86.6%
No	13.4%
Total specific responses	46801
Missing responses	1188

Answered by all who had an operation or procedure

Q54 Before the operation or procedure, did an anaesthetist or another member of staff explain how he or she would put you to sleep or control your pain in a way you could understand?

	National average %
Yes, completely	84.2%
Yes, to some extent	11.5%
No	4.3%
Total specific responses	40917
Missing responses	505

Answered by all who had an operation or procedure and were given anaesthetic

Q55 After the operation or procedure, did a member of staff explain how the operation or procedure had gone in a way you could understand

	National average %
Yes, completely	64.6%
Yes, to some extent	23.5%
No	11.9%
Total specific responses	46917
Missing responses	1309

Answered by all who had an operation or procedure

Leaving hospital

Q56 Did you feel you were involved in decisions about your discharge from hospital?

	National average %
Yes, definitely	53.8%
Yes, to some extent	30.0%
No	16.2%
Total specific responses	63214
I did not need to be involved	7487
Missing responses	1883

Answered by all

Q57 On the day you left hospital, was your discharge delayed for any reason?

	National average %
Yes	39.5%
No	60.5%
Total specific responses	70092
Missing responses	2492
Answered by all	

Answered by all

.....

Q58 What was the main reason for the delay?

	National average %
I had to wait for medicines	60.4%
I had to wait to see the doctor	16.9%
I had to wait for an ambulance	8.7%
Something else	14.0%
Total specific responses	26703
Missing responses	1618

Answered by all who experienced a delayed discharge

Q59 How long was the delay?

	National average %
Up to 1 hour	17.1%
Longer than 1 hour but no longer than 2 hours	29.2%
Longer than 2 hours but no longer than 4 hours	32.4%
Longer than 4 hours	21.3%
Total specific responses	27864
Missing responses	457

Answered by all who experienced a delayed discharge

Q60 Before you left hospital, were you given any written or printed information about what you should or should not do after leaving hospital?

	National average %
Yes	63.0%
No	37.0%
Total specific responses	69741
Missing responses	2843

Q61 Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?

	National average %
Yes, completely	76.3%
Yes, to some extent	15.7%
No	8.0%
Total specific responses	53666
l did not need an explanation	7452
I had no medicines	9038
Missing responses	2428

Answered by all

Q62 Did a member of staff tell you about medication side effects to watch for when you went home?

	National average %
Yes, completely	37.9%
Yes, to some extent	18.1%
No	44.0%
Total specific responses	45699
l did not need an explanation	15229
Missing responses	866

Answered by all who took medicines home

Q63 Were you told how to take your medication in a way you could understand?

	National average %
Yes, definitely	76.5%
Yes, to some extent	14.7%
No	8.9%
Total specific responses	47285
I did not need to be told how to take my medication	13836
Missing responses	714

Answered by all who took medicines home

Q64 Were you given clear written or printed information about your medicines?

	National average %
Yes, completely	67.0%
Yes, to some extent	15.5%
No	17.5%
Total specific responses	57813
Don't know / Can't remember	2628
Missing responses	1357

Answered by all who took medicines home

Q65 Did a member of staff tell you about any danger signals you should watch for after you went home?

	National average %
Yes, completely	40.2%
Yes, to some extent	20.9%
No	38.9%
Total specific responses	53143
It was not necessary	16991
Missing responses	2450
Answered by all	

Answered by all

Q66 Did the doctors or nurses give your family or someone close to you all the information they needed to help)
care for you?	

	National average %
Yes, definitely	44.2%
Yes, to some extent	22.8%
No	33.1%
Total specific responses	47755
No family or friends were involved	10034
My family or friends did not want or need information	12215
Missing responses	2580

Answered by all

.....

Q67 Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?

	National average %
Yes	75.2%
No	24.8%
Total specific responses	65401
Don't know / Can't remember	4886
Missing responses	2297

Answered by all

Q68 Did you receive copies of letters sent between hospital doctors and your family doctor (GP)?

	National average %
Yes, I received copies	43.0%
No, I did not receive copies	57.0%
Total specific responses	64779
Not sure / Don't know	5855
Missing responses	1950
A	

Answered by all

Overall

Q69 Overall, did you feel you were treated with respect and dignity while you were in the hospital?

	National average %
Yes, always	79.3%
Yes, sometimes	17.9%
No	2.8%
Total specific responses	71184
Missing responses	1400

Answered by all

Q70 How would you rate how well the doctors and nurses worked together?

	National average %
Excellent	39.1%
Very good	39.3%
Good	14.5%
Fair	5.4%
Poor	1.8%
Total specific responses	70765
Missing responses	1819

Answered by all

Q71 Overall, how would you rate the care you received?

	National average %
Excellent	43.4%
Very good	35.5%
Good	13.7%
Fair	5.3%
Poor	2.2%
Total specific responses	71044
Missing responses	1540

Answered by all

Q72 During your hospital stay, were you ever asked to give your views on the quality of your care?

	National average %
Yes	9.1%
No	90.9%
Total specific responses	65584
Don't know / Can't remember	5300
Missing responses	1700

Q73 While in hospital, did you see any posters or leaflets explaining how to complain about the care you received?

	National average %
Yes	37.7%
No	62.3%
Total specific responses	54163
Don't know / Can't remember	16473
Missing responses	1948

Answered by all

Q74 Did you want to complain about the care you received in hospital ?

	National average %
Yes	7.7%
No	92.3%
Total specific responses	69920
Missing responses	2664

Answered by all

About you

Proportions of those participating to the survey by sex

	Percentage
Male	46.0%
Female	54.0%
Total specific responses	72584
Missing data	0

Answered by all - data taken from response but if missing taken from sample data

Proportions of those participating to the survey by age group

	Percentage
16-35	9.0%
36-50	15.1%
51-65	26.9%
>65	49.0%
Total specific responses	72583
Missing data	1

Answered by all - data taken from response but if missing taken from sample data

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Q77 Overall, how would you rate your health during the past 4 weeks?

	Percentage
Excellent	8.1%
Very good	20.0%
Good	28.2%
Fair	30.0%
Poor	10.7%
Very poor	2.9%
Total specific responses	69652
Missing responses	2932

Answered by all

Q78. Do you have any of the following long-standing conditions?

	Responses	Percentage	
Deafness or hearing impairment	8027	12.2%	
Blindness or partially sighted	2923	4.4%	
A physical condition	19782	30.0%	
A learning disability	872	1.3%	
A mental health condition	2732	4.1%	
Illness such as cancer, HIV, diabetes, CHD, or epilepsy	20105	30.5%	
I do not have a long- standing condition	25678	39.4%	
Total specific responses	80119	121.90%	
Missing responses	6684		

Answered by all

	Responses	Percentage
Everyday activities that people of my age can usually do	24935	54.3%
At work, in education, or training	6338	13.8%
Access to buildings, streets, or transport vehicles	9934	21.6%
Reading or writing	4875	10.6%
People's attitudes to me because of my condition	4787	10.4%
Communicating, mixing with others, or socialising	7972	17.4%
Other activities	7196	15.7%
This condition does not cause me difficulty with any of these	45941	34.1%
Total specific responses	111978	177.90%
Missing responses	1902	

Answered by those with a long-standing condition

Proportions of those participating to the survey by ethnic group

	Percentage
White	94.3%
Mixed	0.7%
Asian or Asian British	2.6%
Black or Black British	1.9
Chinese or Other Ethnic Group	0.5%
Total specific responses	72070
Missing	514

Answered by all - data taken from response but if missing taken from sample data

Appendix 4: Comparison tables for respondents – 2002, 2005, 2006, 2007 and 2008 results

Notes on significance between years

National surveys of adult inpatients have been carried out in 2002, 2004, 2005, 2006, 2007 and 2008. Because of an additional survey of the experiences of young inpatients in 2004 (ages 0 to 17 years), the sample for the national survey of adult inpatients in 2004 sampled those aged 18 and above. All the surveys except 2004 sampled those aged 16 years and above. Because of this, the results for the 2004 survey of adult inpatients cannot be compared with those from 2002, 2005, 2006, 2007 and 2008.

Of the 74 questions asked in the 2008 inpatients survey (not including the 6 demographic questions), 70 could be compared with results from the 2007 inpatient survey, 62 could be compared with results from the 2006 inpatient survey, 56 with results from the 2005 inpatient survey and 26 with results from the 2002 inpatient survey.

Interpreting the tables

The tables present the results for each question for each year that it has been asked¹. The survey years are shown across the top of the table, with the responses for each question down the side. The bottom row shows the 'number of respondents' – that is the number of people that the results are based on.

The tables show all specific responses to a question. Responses such as "don't know" or "can't remember" are not shown, as these do not help evaluate performance.

If the column for a particular year is missing, it means that the question was not asked in that year. Some new questions were asked in 2008 and it is therefore not possible to provide comparative data. An example of this is question 7 ("Who referred you to see a specialist?").

Filter questions

Not all of the questions in the survey were to be answered by everybody. Some questions are not applicable to everyone: for example, if a respondent did have an operation or procedure, then they would be asked to skip those questions as they are not relevant to them.

Statistical significance

We carried out statistical tests on the data to determine whether there had been any statistically significant changes in the results for 2008 compared with other years. A statistically significant difference means that the change in the results is very unlikely to have occurred by chance².

The final two columns of the tables use 'up' and 'down' arrows to indicate whether there has been a 'statistically significant' change between 2008 and 2007 (the last time the survey was carried out), and also between 2008 and 2002 (when the first survey was carried out):

shows that there has been a statistically significant **increase** in results

¹ Results presented in the tables have been rounded up or down to whole numbers. If you add two response categories together (such as 'very good' and 'good') you may get a figure which is slightly different to the figures reported elsewhere, because these used results to at least two decimal places. Likewise, columns may not add up to exactly 100%, due to the rounding.

² We used z-tests of the column proportions using the Bonferroni method correcting for multiple comparisons only (for questions with three years of comparable data).

shows that there has been a statistically significant **decrease** in results.

Where a cell in the final two columns is blank, there has been no statistically significant change.

For example, in the table for question 9 it can be seen that between 2002 and 2008, there has been a significant increase in the proportion of respondents saying that they were admitted as soon as they thought was necessary – as indicated by an 'up' arrow. There have been corresponding decreases for the other response options. Each of these response options are shown in the table to be significantly less in the 2008 results than those from 2002, by an arrow pointing downward.

In some of the tables, the arrows suggest that there has been a significant change but the results look the same. An example of this can be seen in the table for question 38 where the 'Yes, often' percentage is the same for 2002 and for 2008 (7%) but there is an upward arrow to show there has been a significant increase. This is because results presented in the tables have been rounded up or down to a whole number. If the results were presented to a number of decimal places, a small observable difference would be shown. Some of the changes in the survey results are very small, but because of the large number of respondents that took part, they are statistically significant.

		S	urvey Ye	ar		Significant change	Significant change
	2002	2005	2006	2007	2008	between 07 and 08	between 02 and 08
Emergency or urgent	52%	53%	54%	54%	55%	↑	↑
Waiting list or planned in						\downarrow	\downarrow
advance	48%	44%	44%	43%	42%		
Something else	-	3%	3%	3%	3%		
Number of respondents	89815	77840	77665	73355	70020		

Answered by all

Q1v2 Was your most recent hospital stay planned in advance or an emergency?

	Survey Year					Significant change between	Significant change
	2002	2005	2006	2007	2008	07 and 08	between 02 and 08
Emergency or urgent	52%	55%	55%	56%	57%	<u>↑</u>	↑
Waiting list or planned in						\downarrow	\downarrow
advance	48%	45%	45%	44%	43%		
Number of respondents	89815	75774	75540	71417	68171		

Answered by all but filtered to remove respondents who said they were admitted for "something else"

Q2 When you arrived at the hospital, did you go to the Emergency Department?

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes	86%	87%	88%	88%	
No	14%	13%	12%	12%	
Number of respondents	41348	42648	40960	39793	

Answered by all who were admitted for an emergency, urgent or other reason

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		Significant change between			
	2005	07 and 08			
Not enough	15%	17%	16%	17%	
Right amount	73%	72%	74%	73%	
Too much	0%	0%	1%	1%	
I was not given any					
information about my					
treatment/condition	11%	11%	10%	9%	
Number of respondents	35243	37315	32535	31960	

Q3 While you were in the Emergency Department, how much information about your treatment or condition was given to you?

Answered by all who went to the Emergency Department upon arrival

Q4 Were you given enough privacy when being examined or treated in the Emergency Department?

		Survey Year						
	2005	2006	2007	2008	between 07 and 08			
Yes, definitely	79%	77%	75%	76%	↑			
Yes, to some extent	19%	20%	23%	22%	\downarrow			
No	2%	2%	2%	2%				
Number of respondents	35877	37783	35347	34412				

Answered by all who went to the Emergency Department upon arrival

		S	urvey Yea	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Less than 1 hour	26%	23%	21%	22%	22%		\downarrow
At least 1 hour but less							↑ (
than 2 hours	13%	19%	18%	18%	18%		
At least 2 hours but less							↑ (
than 4 hours	15%	25%	24%	24%	25%		
At least 4 hours but less						↑	↑ (
than 8 hours	19%	19%	22%	21%	22%		
8 hours or longer	15%	6%	6%	6%	6%		\downarrow
I did not have to wait	13%	9%	9%	8%	8%	\downarrow	\downarrow
Number of respondents	46549	33692	35922	34528	33543		

Q5 Following arrival at the hospital, how long did you wait before being admitted to a bed on a ward?

Answered by all who went to the Emergency Department upon arrival

Q6 When you were referred to see a specialist, were you offered a choice of hospital for your first hospital appointment?

	Surve	ey Year	Significant change between
	2007	2008	07 and 08
Yes	28%	33%	<u>↑</u>
No	72%	67%	\downarrow
Number of respondents	34339	32233	

Answered by all whose most recent admission to hospital was waiting list or planned in advance

Q7 Who referred you to see a specialist?

	Survey Year
	2008
A doctor from my local general practice	71%
Any other doctor or specialist	24%
A practice nurse or nurse practitioner	2%
Any other health professional (for example, a dentist, optometrist or	
physiotherapist)	3%
Number of respondents	32853

Answered by all whose most recent admission to hospital was waiting list or planned in advance

Q8 Overall, from the time you first talked to this health professional about being referred to hospital, how long did you wait to be admitted to hospital?¹

	Survey Year
	2008
Up to 1 month	29%
1 to 2 months	25%
3 to 4 months	23%
5 to 6 months	10%
More than 6 months	13%
Number of respondents	30864

Answered by all whose most recent admission to hospital was waiting list or planned in advance

¹ It is not possible to compare waiting times for admission to hospital with data from previous years due to a change in question wording which means that the data is no longer comparable.

Q9 How do you feel about the length of time you were on the waiting list before your admission to hospital?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
I was admitted as soon as I						↑	\uparrow
thought was necessary	68%	72%	74%	72%	76%		
I should have been admitted a						\downarrow	\downarrow
bit sooner	19%	19%	18%	18%	16%		
I should have been admitted a						\downarrow	\downarrow
lot sooner	12%	9%	8%	10%	8%		
Number of respondents	43893	37863	37266	34378	32907		

Answered by all whose most recent admission to hospital was waiting list or planned in advance

Q10 Were you given a choice of admission dates?

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes	27%	27%	27%	30%	<u>↑</u>
Νο	73%	73%	73%	70%	\rightarrow
Number of respondents	38042	37738	34767	32473	

Answered by all whose most recent admission to hospital was waiting list or planned in advance

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
No	78%	80%	80%	79%	80%	<u>↑</u>	\uparrow
Yes, once	17%	17%	17%	18%	17%		
Yes, 2 or 3 times	4%	3%	3%	3%	3%		\downarrow
Yes, 4 times or more	1%	0%	0%	0%	0%		\downarrow
Number of respondents	44319	38730	38047	35572	33382		

Q11 Was your admission date changed by the hospital?

Answered by all whose most recent admission to hospital was waiting list or planned in advance

Q12 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?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, definitely	13%	9%	11%	11%	11%		\downarrow
Yes, to some extent	20%	18%	19%	18%	19%	<u>↑</u>	
No	67%	73%	71%	71%	69%	\rightarrow	\uparrow
Number of respondents	90156	77850	78188	73617	70378		

Q13 While in hospital, did you ever stay in a critical care area (Intensive Care Unit, High Dependency Unit or Coronary Care Unit?

	s	Significant change between		
	2006	2007	2008	07 and 08
Yes	19%	20%	21%	
No	81%	80%	79%	
Number of respondents	75151	70938	67451	

Answered by all

Q14 When you were first admitted to a bed on a ward, did you share a sleeping area, for example a room or bay, with patients of the opposite sex?

	s	Significant change between		
	2006	2007	2008	07 and 08
Yes	25%	24%	24%	
No	75%	76%	76%	
Number of respondents	77890	73612	69855	

Answered by all

Q15 When you were first admitted, did you mind sharing a sleeping area, for example a room or bay, with patients of the opposite sex?

	Survey Year
	2008
Yes	32%
Νο	68%
Number of respondents	16383

Answered by all who shared a sleeping area when first admitted

Q16 During your stay in hospital, how many wards did you stay in?

	S	Significant change		
	2006	2007	2008	between 07 and 08
1	66%	65%	64%	
2	27%	28%	28%	
3 or more	7%	8%	8%	
Number of respondents	77841	73555	70096	

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Answered by all

	S	Significant change		
	2006	2007	2008	between 07 and 08
Yes	19%	18%	17%	\rightarrow
Νο	81%	82%	83%	↑
Number of respondents	25941	25172	24387	

Q17 After you moved to another ward (or wards), did you ever share a sleeping area, for example a room or bay, with patients of the opposite sex?

Answered by all who stayed in two or more wards

Q18 After you moved, did you mind sharing a sleeping area, for example a room or bay, with patients of the opposite sex?

	Survey Year
	2008
Yes	38%
Νο	62%
Number of respondents	2066

Answered by all who shared a sleeping area after moving wards

Q19 While staying in the hospital, did you ever use the same bathroom or shower area as patients of the opposite sex?

	Survey Year			Significant change between	
	2006	2007	2008	07 and 08	
Yes	30%	30%	30%		
Yes, because it had special bathing equipment that I					
needed	2%	2%	2%		
Νο	68%	68%	69%		
Number of respondents	68312	64782	61610		

Answered by all

Q20 Were you ever bothered by noise at night from other patients?

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes	37%	38%	38%	39%	
No	63%	62%	62%	61%	\downarrow
Number of respondents	78844	78996	74402	70950	

Answered by all

Q21 Were you ever bothered by noise at night from hospital staff?

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes	18%	19%	20%	21%	
Νο	82%	81%	80%	79%	
Number of respondents	78944	78920	74421	71025	

Answered by all

Q22 In your opinion, how clean was the hospital room or ward that you were in?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Very clean	56%	52%	53%	53%	60%	↑	
Fairly clean	36%	40%	40%	40%	35%	\rightarrow	\downarrow
Not very clean	6%	6%	6%	6%	4%	\rightarrow	\rightarrow
Not at all clean	2%	2%	2%	1%	1%	\downarrow	\downarrow
Number of respondents	93628	79599	79579	75039	71590		

Answered by all

Q23 How clean were the toilets and bathrooms that you used in hospital?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Very clean	51%	46%	47%	47%	52%	<u>↑</u>	<u>↑</u>
Fairly clean	37%	40%	42%	42%	39%	\rightarrow	↑
Not very clean	9%	10%	9%	9%	7%	\rightarrow	\rightarrow
Not at all clean	3%	3%	3%	3%	2%	\rightarrow	\rightarrow
Number of respondents	91714	77995	77601	72924	69617		

Answered by all

Q24 Did you feel threatened during your stay in hospital by other patients or visitors?

	Surve	y Year	Significant change between
	2007	2008	07 and 08
Yes	4%	4%	
Νο	96%	96%	
Number of respondents	74961	71544	

Answered by all

	Surve	y Year	Significant change between	
	2007 20		07 and 08	
Yes, and I could lock it if I wanted to	28%	31%	↑	
Yes, but I could not lock it	67%	65%	\downarrow	
No	4%	4%		
Number of respondents	65940	63041		

Q25 Did you have somewhere to keep your personal belongings whilst on the ward?

Answered by all

Q26 How would you rate the hospital food?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Very good	18%	18%	18%	19%	21%	<u>↑</u>	<u>↑</u>
Good	35%	36%	35%	36%	36%		↑
Fair	31%	31%	31%	31%	30%	\rightarrow	\downarrow
Poor	16%	15%	15%	15%	14%	\rightarrow	\downarrow
Number of respondents	89304	76133	76046	72073	68842		

Answered by all

Q27 Were you offered a choice of food?

	s	Survey Year					
	2006	2007	2008	07 and 08			
Yes, always	79%	77%	78%				
Yes, sometimes	16%	16%	16%	\downarrow			
No	6%	7%	6%	\downarrow			
Number of respondents	75283						

Answered by all

Q28 Did you get enough help from staff to eat your meals?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, always	58%	62%	58%	60%	63%	<u>↑</u>	↑ (
Yes, sometimes	24%	21%	21%	20%	19%		\downarrow
No	18%	18%	20%	20%	18%	\downarrow	
Number of respondents	19049	19982	19041	20709	21079		

Q29 When you had important questions to ask a doctor, did you get answers that you could understand?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, always	65%	67%	68%	67%	68%		↑ (
Yes, sometimes	29%	29%	27%	27%	27%		\downarrow
No	6%	5%	5%	6%	5%		\downarrow
Number of respondents	82038	72668	72653	67045	64722		

Answered by all

Q30 Did you have confidence and trust in the doctors treating you?

		Significant change between							
	2005	2006	2007	2008	07 and 08				
Yes, always	80%	81%	80%	81%					
Yes, sometimes	17%	16%	17%	17%					
No	3%	3%	3%	3%					
Number of respondents	79625	79625 79676 74989 71465							

Answered by all

Q31 Did doctors talk in front of you as if you weren't there?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, often	6%	6%	6%	6%	6%		
Yes, sometimes	23%	22%	22%	22%	22%		\downarrow
No	71%	72%	72%	72%	72%		\uparrow
Number of respondents	92764	79332	79224	74721	71292		

Answered by all

Q32 As far as you know, did doctors wash or clean their hands between touching patients?

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes, always	67%	69%	68%	74%	<u>↑</u>
Yes, sometimes	21%	19%	20%	18%	\downarrow
No	12%	12%	12%	8%	\downarrow
Number of respondents	47517				

.....

Answered by all

understand ?								
		S	urvey Ye	Significant change between	Significant change between			
	2002	2005	2006	2007	2008	07 and 08	02 and 08	
Yes, always	63%	65%	65%	65%	66%	↑	<u>↑</u>	
Yes, sometimes	31%	31%	30%	30%	29%		\downarrow	
No	6%	5%	5%	5%	5%		\downarrow	
Number of respondents	79115	72024	72345	66729	64282			

Q33 When you had important questions to ask a nurse, did you get answers that you could understand?

Answered by all

Q34 Did you have confidence and trust in the nurses treating you?

		Significant change			
	2005	2006	2007	2008	between 07 and 08
Yes, always	74%	73%	74%	75%	<u>↑</u>
Yes, sometimes	23%	23%	23%	22%	\rightarrow
No	3%	4%	3%	3%	
Number of respondents	79635	79626	75091	71686	

Answered by all

Q35 Did nurses talk in front of you as if you weren't there?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, often	4%	5%	5%	5%	5%		<u>↑</u>
Yes, sometimes	15%	17%	17%	17%	17%		↑ (
No	81%	79%	78%	79%	78%		\downarrow
Number of respondents	93092	79427	79403	74902	71437		

Answered by all

Q36 In your opinion, were there enough nurses on duty to care for you in hospital?

		Surve	y Year		Significant change
	2005	2006	2007	2008	between 07 and 08
There were always or nearly always enough nurses	58%	56%	56%	58%	
There were sometimes enough nurses	31%	32%	32%	31%	\downarrow
There were rarely or never enough nurses	11%	12%	12%	11%	\downarrow
Number of respondents	79425	79220	74872	71444	

Answered by all

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		Significant change			
	2005	2006	2007	2008	between 07 and 08
Yes, always	69%	71%	70%	76%	↑
Yes, sometimes	24%	23%	23%	20%	\rightarrow
Νο	7%	6%	7%	4%	\downarrow
Number of respondents	58990	57669	54804	54789	

Q37 As far as you know, did nurses wash or clean their hands between touching patients?

Answered by all

Q38 Sometimes in a hospital, a member of staff will say one thing and another will say something quite different. Did this happen to you?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008		02 and 08
Yes, often	7%	7%	8%	7%	7%		↑
Yes, sometimes	24%	27%	27%	27%	26%		↑
No	69%	66%	65%	66%	66%		\downarrow
Number of respondents	93059	79258	79271	74637	71264		

Answered by all

Q39 Were you involved as much as you wanted to be in decisions about your care and treatment?

		Survey Year								
	2005	2006	2007	2008	between 07 and 08					
Yes, definitely	53%	52%	51%	52%	↑					
Yes, to some extent	37%	37%	38%	37%	\downarrow					
No	10%	11%	11%	10%	\downarrow					
Number of respondents	78852	78875	74350	70991						

Answered by all

Q40 How much information about your condition or treatment was given to you?

		Survey Year							
	2005	2006	2007	2008	between 07 and 08				
Not enough	20%	21%	21%	21%					
The right amount	79%	79%	79%	79%					
Too much	1%	1%	1%	1%	↑ (
Number of respondents	79243	79146	74668	71168					

Answered by all

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, definitely	42%	44%	43%	43%	44%		<u>↑</u>
Yes, to some extent	38%	40%	40%	40%	40%		↑
No	19%	16%	16%	17%	16%		\rightarrow
Number of respondents	64545	54302	54683	50257	48706		

Q41 If your family or someone else close to you wanted to talk to a doctor, did they have enough opportunity to do so?

Answered by all

Q42 Did you find someone on the hospital staff to talk to about your worries and fears?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, definitely	43%	42%	42%	40%	41%	<u>↑</u>	\downarrow
Yes, to some extent	39%	37%	36%	38%	37%	\rightarrow	\downarrow
No	17%	21%	22%	22%	22%		↑ (
Number of respondents	60887	49902	50593	44576	43435		

Answered by all

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, always	68%	71%	70%	69%	70%	↑	<u>↑</u>
Yes, sometimes	21%	22%	22%	22%	22%		<u>↑</u>
No	10%	8%	9%	9%	8%	\rightarrow	\rightarrow
Number of respondents	91613	78392	78247	73644	70521		

Q43 Were you given enough privacy when discussing your condition or treatment?

Answered by all

Q44 Were you given enough privacy when being examined or treated?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, always	87%	88%	88%	87%	88%	<u>↑</u>	<u>↑</u>
Yes, sometimes	10%	10%	11%	11%	10%	\rightarrow	
No	3%	2%	2%	2%	2%	\downarrow	\downarrow
Number of respondents	93064	79357	79286	74623	71381		

Q45 Were you ever in any pain?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes	68%	66%	67%	66%	66%		\downarrow
No	32%	34%	33%	34%	34%		↑ (
Number of respondents	91652	77645	77410	73399	69906		

Answered by all

Q46 Do you think the hospital staff did everything they could to help control your pain?

	Survey Year					Significant change between	Significant change between
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, definitely	72%	73%	72%	71%	72%		
Yes, to some extent	22%	23%	23%	23%	23%		
No	6%	5%	5%	6%	6%		
Number of respondents	62322	50919	52022	49163	46937		

Answered by all who experienced pain

Q47 How many minutes after you used the call button did it usually take before you got the help you needed?

		Significant change between					
	2005	2006	2007	2008	07 and 08		
0 minutes/ right away	19%	18%	17%	17%			
1-2 minutes	40%	39%	39%	39%			
3-5 minutes	27%	27%	28%	28%			
More than 5 minutes	13%	15%	15%	15%			
I never got help when I used the call button	1%	2%	1%	2%			
Number of respondents	43758	44466	42861	42026			
Answered by all							

Q48 During your stay in hospital, did you have an operation or procedure?

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes	69%	68%	68%	67%	\downarrow
No	31%	32%	32%	33%	<u>↑</u>
Number of respondents	77178	77266	72824	69589	

Answered by all

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes, completely	81%	81%	81%	82%	
Yes, to some extent	15%	15%	15%	15%	
Νο	4%	4%	4%	3%	\downarrow
Number of respondents	52531	52372	49566	46809	

Q49 Beforehand, did a member of staff explain the risks and benefits of the operation or procedure in a way you could understand?

Answered by all who had an operation or procedure

Q50 Beforehand, did a member of staff explain what would be done during the operation or ______

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes, completely	74%	74%	74%	74%	
Yes, to some extent	21%	21%	21%	21%	
No	5%	5%	5%	5%	
Number of respondents	52198	52020	49309	46454	

Answered by all who had an operation or procedure

Q51 Beforehand, did a member of staff answer your questions about the operation or procedure in a
way you could understand?

		Significant change			
	2005	2006	2007	2008	between 07 and 08
Yes, completely	76%	76%	76%	76%	
Yes, to some extent	21%	20%	21%	21%	
Νο	4%	4%	4%	3%	\downarrow
Number of respondents	45681	45675	43276	41401	

Answered by all who had an operation or procedure

Q52 Beforehand, were you told how you could expect to feel after you had the operation or _procedure?

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes, completely	55%	56%	56%	57%	
Yes, to some extent	28%	28%	28%	28%	
No	16%	16%	16%	15%	\rightarrow
Number of respondents	53179	53002	50200	47314	

Answered by all who had an operation or procedure

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		Significant change			
	2005	2006	2007	2008	between 07 and 08
Yes	84%	84%	87%	87%	
Νο	16%	16%	13%	13%	
Number of respondents	52798	52648	49837	46801	

Q53 Before the operation or procedure, were you given an anaesthetic or medication to put you to sleep or control your pain?

Answered by all who had an operation or procedure

Q54 Before the operation or procedure, did an anaesthetist or another member of staff explain how he or she would put you to sleep or control your pain in a way you could understand?

	Survey Year				Significant change
	2005	2006	2007	2008	between 07 and 08
Yes, completely	83%	84%	84%	84%	
Yes, to some extent	12%	12%	12%	11%	
No	5%	5%	5%	4%	
Number of respondents	44738	44765	43672	40917	

Answered by all who had an operation or procedure and were given anaesthetic

Q55 After the operation or procedure, did a member of staff explain how the operation or procedure had gone in a way you could understand?

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes, completely	63%	64%	65%	65%	
Yes, to some extent	24%	24%	23%	23%	
Νο	13%	13%	12%	12%	
Number of respondents	52878	52651	50051	46917	

Answered by all who had an operation or procedure

Q56 Did you feel you were involved in decisions about your discharge from hospital?

	Surve	y Year	Significant change between	
	2007	2008	07 and 08	
Yes, definitely	53%	54%	↑	
Yes, to some extent	30%	30%		
Νο	17%	16%	\downarrow	
Number of respondents	65843	63214		

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes	38%	38%	39%	40%	<u>↑</u>
No	62%	62%	61%	60%	\rightarrow
Number of respondents	77864	77912	73659	70092	

Q57 On the day you left hospital, was your discharge delayed for any reason?

Answered by all

Q58 What was the main reason for the delay?

		Significant change			
	2005	2006	2007	2008	between 07 and 08
I had to wait for medicines	61%	61%	61%	60%	
I had to wait to see the doctor	17%	17%	17%	17%	
I had to wait for an ambulance	8%	8%	9%	9%	
Something else	13%	14%	14%	14%	
Number of respondents	28372	28376	27218	26703	

Answered by all who experienced a delayed discharge

Q59 How long was the delay?

		Significant change			
	2005	2006	2007	2008	between 07 and 08
Up to 1 hour	18%	18%	17%	17%	
Longer than 1 hour but no longer than 2 hours	29%	29%	30%	29%	
Longer than 2 hour but no longer than 4 hours	32%	32%	33%	32%	
Longer than 4 hours	21%	21%	20%	21%	
Number of respondents	29481	29704	28413	27864	

Answered by all who experienced a delayed discharge

Q60 Before you left hospital, were you given any written or printed information about what you should or should not do after leaving hospital?

	Surve	y Year	Significant change between
	2007	2008	07 and 08
Yes	61%	63%	Ť
No	39%	37%	\downarrow
Number of respondents	72937	69741	

Answord by all

Answered by all

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, completely	79%	79%	76%	76%	76%		\downarrow
Yes, to some extent	14%	15%	16%	16%	16%		<u>↑</u>
No	7%	7%	8%	8%	8%		\uparrow
Number of respondents	69454	59902	59904	55957	53666		

Q61 Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?

Answered by all

Q62 Did a member of staff tell you about medication side effects to watch for when you went home?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, completely	39%	40%	37%	36%	38%		\downarrow
Yes, to some extent	16%	18%	18%	18%	18%		↑
No	44%	42%	45%	46%	44%	\downarrow	
Number of respondents	55300	48565	50033	47627	45699		

Answered by all who took medicines home

Q63 Were you told how to take your medication in a way you could understand?

	Surve	y Year	Significant change between	
	2007	2008	07 and 08	
Yes, definitely	76%	76%	\uparrow	
Yes, to some extent	15%	15%		
Νο	9%	9%		
Number of respondents	49225	47285		

Answered by all who took medicines home

Q64 Were you given clear written or printed information about your medicines?

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes, completely	62%	65%	66%	67%	
Yes, to some extent	18%	17%	16%	15%	
No	20%	18%	18%	18%	\downarrow
Number of respondents	63254	64338	60648	57813	

Answered by all who took medicines home

Q65 Did a member of staff tell you about any danger signals you should watch for after you went
home?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, completely	41%	40%	39%	39%	40%	↑	\downarrow
Yes, to some extent	20%	21%	21%	21%	21%		
No	39%	40%	40%	41%	39%	\downarrow	
Number of respondents	89670	58366	58043	55795	53143		

Answered by all

Q66 Did the doctors or nurses give your family or someone close to you all the information they needed to help care for you?

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, definitely	43%	43%	42%	43%	44%	↑	\uparrow
Yes, to some extent	24%	24%	24%	22%	23%		\downarrow
No	33%	33%	34%	35%	33%	\downarrow	
Number of respondents	63867	52903	53682	50019	47755		

Answered by all

Q67 Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes	76%	76%	74%	75%	<u>↑</u>
No	24%	24%	26%	25%	\rightarrow
Number of respondents	71536	72233	68594	65401	

Answered by all

Q68 Did you receive copies of letters sent between hospital doctors and your family doctor (GP)?

		Significant change between			
	2005	2006	2007	2008	07 and 08
Yes, I received copies	35%	37%	39%	43%	↑ (
No, I did not receive copies	65%	63%	61%	57%	\downarrow
Number of respondents	71433				

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Yes, always	79%	79%	78%	78%	79%	↑	\uparrow
Yes, sometimes	18%	18%	18%	19%	18%	\rightarrow	
No	3%	3%	3%	3%	3%	\rightarrow	\downarrow
Number of respondents	92961	79008	79030	74873	71184		

Q69 Overall, did you feel you were treated with respect and dignity while you were in the hospital?

Answered by all

Q70 How would you rate how well the doctors and nurses worked together?

		Significant change			
	2005	2006	between 07 and 08		
Excellent	38%	36%	39%	39%	
Very good	39%	40%	38%	39%	<u>↑</u>
Good	15%	16%	15%	14%	\downarrow
Fair	6%	6%	6%	5%	\downarrow
Poor	2%	2%	2%	2%	\downarrow
Number of respondents	78465	78108	74365	70765	

Answered by all

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Excellent	38%	40%	41%	42%	43%	<u>↑</u>	↑
Very good	36%	37%	36%	35%	35%		\rightarrow
Good	17%	15%	15%	14%	14%	\rightarrow	\rightarrow
Fair	7%	6%	6%	6%	5%	\rightarrow	\rightarrow
Poor	2%	2%	2%	2%	2%		
Number of respondents	92902	78319	78539	74732	71044		

Q71 Overall, how would you rate the care you received?

Answered by all

Q72 During your hospital stay, were you ever asked to give your views on the quality of your care?

		Survey Year							
	2005	2006	2007	2008	between 07 and 08				
Yes	6%	7%	7%	9%	↑ (
No	94%	93%	93%	91%	\rightarrow				
Number of respondents	72918	73453	69542	65584					

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Answered by all

Q73 While in hospital, did you see any posters or leaflets explaining how to complain about the care you received?

	Surve	y Year	Significant change
	2007	2008	between 07 and 08
Yes	37%	38%	\uparrow
Νο	63%	62%	\downarrow
Number of respondents	56850	54163	

Answered by all

Q74 Did you want to complain about the care you received in hospital ?

	Surve	y Year	Significant change between
	2007	2008	07 and 08
Yes	7%	8%	
Νο	93%	92%	\downarrow
Number of respondents	72861	69920	

Answered by all

Proportions of those participating to the survey by sex

		S	urvey Ye	ar		Significant change between	Significant change between
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Male	46%	46%	45%	45%	46%		
Female	54%	54%	55%	55%	54%		
Number of respondents	93149	78948	79017	74127	71268		

Answered by all - response data only

Proportions of those participating to the survey by age

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
16-35	12%	11%	10%	9%	9%		\downarrow
36-50	16%	16%	16%	16%	15%		\rightarrow
51-65	25%	27%	26%	27%	27%		↑
66-80	33%	34%	34%	34%	34%		↑
>80	14%	13%	14%	14%	14%		
Number of respondents	93070	78593	78366	73576	70950		

Answered by all - response data only

		S	urvey Ye	Significant change between	Significant change between		
	2002	2005	2006	2007	2008	07 and 08	02 and 08
Excellent	8%	8%	7%	7%	8%	1	
Very good	18%	19%	19%	19%	20%	↑	↑
Good	26%	28%	28%	28%	28%		↑ (
Fair	32%	31%	31%	31%	30%	\downarrow	\downarrow
Poor	12%	12%	12%	12%	11%	\downarrow	\downarrow
Very poor	3%	3%	3%	3%	3%	\downarrow	
Number of respondents	93157	78016	78361	73550	69652		

Q77 Overall, how would you rate your health during the past 4 weeks?

Answered by all

Q78 Do you have any of the following long-standing conditions? Tick all that apply

	Surve	y Year	Significant change between
	2007	2008	07 and 08
I have a long-standing condition involving deafness or hearing			\downarrow
impairment	13%	12%	
I have a long-standing condition involving blindness or partially			\downarrow
sighted	5%	4%	
I have a long-standing condition involving a physical condition	31%	30%	\downarrow
I have a long-standing condition involving a learning disability	1%	1%	
I have a long-standing condition involving a mental health			
condition	4%	4%	
I have a long-standing condition involving an illness such as			
cancer, HIV, diabetes, CHD, or epilepsy	31%	31%	
I do not have a long-standing condition	39%	39%	\uparrow
Total specific responses	69528	65900	

	Surve	Significant change between	
	2007	2008	07 and 08
This condition causes me difficulty with everyday			\downarrow
activities that people of my age can usually do	61%	54%	
This condition causes me difficulty at work, in education, or training	16%	14%	\downarrow
This condition causes me difficulty with access to			\downarrow
buildings, streets, or transport vehicles	29%	22%	·
This condition causes me difficulty with reading or			\downarrow
writing	12%	11%	
This condition causes me difficulty with people's attitudes to me because of my condition	12%	10%	\downarrow
This condition causes me difficulty with communicating,			\downarrow
mixing with others, or socialising	20%	17%	
This condition causes me difficulty with other activities	18%	16%	\downarrow
This condition does not cause me difficulty with any of			\uparrow
these	26%	34%	
Total specific responses	42393	45941	

Q79 Does this condition(s) cause you difficulty with any of the following? Tick all that apply

Answered by those with a long-standing condition

Proportions of those p	participating to the	survey by ethnic group	

	Survey Year					Significant change between	Significant change between
	2002	2005	2006	2007	2008	07 and 08	02 and 08
White	95%	95%	95%	95%	96%	<u>↑</u>	\uparrow
Mixed	1%	1%	1%	1%	1%		
Asian or Asian British	2%	3%	2%	3%	2%	↓	\downarrow
Black or Black British	2%	2%	2%	2%	1%	\rightarrow	\downarrow
Chinese or other ethnic		0%				\downarrow	
group	0%	0%	0%	0%	0%		
Number of respondents	90983	77964	77267	72666	68098		

Answered by all - response data only

Appendix 5: Demographic breakdown of respondents and non-respondents

Gender of respondents

	2005	2006	2007	2008
Male	58.7%	57.6%	55.0%	52.9%
Female	59.8%	59.7%	56.9%	54.0%
Total specific responses	80793	80692	75931	72584

Age groups of respondents

	2005	2006	2007	2008
16-35	37.1%	36.8%	33.5%	30.8%
36-50	52.4%	52.4%	48.5%	46.1%
51-65	68.6%	67.9%	65.6%	63.0%
>65	65.0%	64.6%	62.1%	59.5%
Total specific responses	79527	80691	75931	72583

Age and Sex groups for respondents

	2005	2006	2007	2008
Men 16-35	29.5%	29.7%	26.8%	24.9%
Men 36-50	46.7%	45.8%	41.4%	40.6%
Men 51-65	66.3%	64.6%	62.6%	59.9%
Men > 65	68.7%	68.0%	65.4%	63.1%
Women 16-35	42.7%	42.3%	68.5%	35.3%
Women 36-50	56.9%	57.5%	54.1%	50.7%
Women 51-65	70.8%	71.3%	68.7%	66.2%
Women > 65	61.9%	61.7%	59.4%	56.5%
Total specific responses	79527	80691	75948	72583

Ethnic category for respondents

	2005	2006	2007	2008
White	66.3%	60.4%	57.7%	57.8%
Mixed	64.7%	43.8%	38.3%	55.5%
Asian or Asian British	43.6%	39.3%	36.5%	36.9%
Black or Black British	45.3%	42.8%	40.0%	41.1%
Chinese	52.7%	52.4%	42.7%	50.5%
Other ethnic category	11.7%	42.1%	41.7%	20.3%
Total specific responses	77964	80692	66563	72070

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Length of stay clusters for respondents

	2005	2006	2007	2008
Single overnight stay	55.5%	55.0%	52.8%	50.0%
Overnight stay 2-5 nights	60.9%	60.6%	58.5%	56.2%
Overnight stay 6-10 nights	64.9%	64.5%	60.5%	58.5%
Overnight stay 11-15 nights	60.3%	60.1%	56.4%	54.0%
Overnight stay more than 15 nights	51.6%	51.1%	48.2%	45.2%
Total specific responses	78239	80684	75931	72576

Respondent differences in discharge specialty

	2005	2006	2007	2008
General medicine	53.7%	52.8%	50.6%	47.5%
General surgery	62.8%	61.3%	59.1%	56.4%
Trauma and orthopaedics	66.1%	66.2%	63.5%	62.0%
Gynaecology	58.8%	59.8%	55.4%	53.8%
Urology	68.1%	66.0%	64.1%	62.1%
Cardiology	68.4%	68.6%	64.2%	61.9%
Geriatric medicine	48.1%	49.1%	44.5%	41.5%
ENT	45.5%	55.8%	52.5%	49.0%
All other specialties	56.0%	55.5%	53.5%	51.0%
Total number of specific responses	80793	80692	75949	72584

Respondent differences for trust cluster

	2005	2006	2007	2008
Small acute outside London	62.7%	63.0%	60.2%	56.1%
Small acute London	46.5%	48.2%	46.3%	43.2%
Medium acute outside London	59.0%	59.5%	56.6%	53.8%
Medium acute London	51.7%	48.2%	46.5%	44.1%
Large acute outside London	59.7%	58.8%	56.4%	53.8%
Large acute London	54.2%	52.3%	46.5%	46.7%
Acute specialist	66.8%	65.7%	61.6%	61.0%
Orthopaedic	69.8%	71.7%	72.6%	69.3%
Acute teaching outside London	58.4%	57.6%	55.0%	52.2%
Acute teaching London	52.6%	49.7%	48.7%	47.6%
Multi-service	58.2%	57.8%	56.2%	52.7%
Total specific responses	80793	80692	75949	72584

	2005 2006		2007	2008
London Trust	57.6%	48.2%	46.5%	44.3%
Outside London Trust	60.5%	59.0%	57.4%	54.4%
Other	59.3%	58.8%	56.6%	55.0%
Total specific responses	78440	80684	75949	72584

Respondent differences for location of trust (London or not)

Appendix 6: Year on year comparisons of respondent demographics

Respondents by sex

	Year of survey				
	2005	2006	2007	2008	
Male	45.6%	45.4%	45.5%	46.0%	
Female	54.4%	54.6%	54.5%	54.0%	
Total number of specific responses	80793	80694	75931	72584	

Respondents by age group

	Year of survey			
	2005	2006	2007	2008
16-35	10.5%	10.0%	9.3%	9.0%
36-50	15.8%	15.9%	15.4%	15.1%
51-65	26.4%	26.3%	26.7%	26.9%
>65	47.3%	47.8%	48.6%	49.0%
Number of total specific responses	80793	80694	75931	72583

Respondents by age and sex

	Year of survey			
	2005	2006	2007	2008
Men 16-35	3.5%	3.5%	3.2%	3.1%
Men 36-50	6.2%	6.2%	5.8%	6.0%
Men 51-65	12.7%	12.5%	12.7%	12.9%
Men > 65	23.2%	23.2%	23.8%	23.9%
Women 16-35	6.9%	6.5%	6.1%	5.9%
Women 36-50	9.6%	9.8%	9.5%	9.1%
Women 51-65	13.7%	13.7%	14.0%	14.0%
Women > 65	24.2%	24.6%	24.9%	25.0%
Total number of specific responses	80793	80693	75948	72583

Respondents by ethnic group

	Year of survey			
	2005	2006	2007	2008
White	94.4%	94.5%	94.1%	94.3%
Mixed	0.6%	0.6%	0.4%	0.7%
Asian or Asian British	2.7%	2.7%	2.5%	2.6%
Black or Black British	1.8%	1.8%	1.9%	1.9%
Chinese or Other Ethnic Group	0.4%	0.5%	1.1%	0.5%
Total number of specific responses	80206	80090	66563	72070

Respondents by health status

	Year of survey			
	2005 2006		2007	2008
Excellent	7.6%	7.3%	7.1%	8.1%
Very good	19.2%	18.9%	18.9%	20.0%
Good	27.5%	27.6%	27.7%	28.2%
Fair	30.9%	31.0%	30.9%	30.0%
Poor	11.6%	11.7%	11.9%	10.7%
Very poor	3.2%	3.5%	3.5%	2.9%
Total number of specific responses	78016	78361	73550	69652

Respondents by eight most common main specialty codes

	Year of survey			
	2005	2006	2007	2008
General medicine	20.9%	20.6%	20.5%	20.6%
General surgery	19.0%	18.8%	18.5%	18.2%
Trauma and orthopaedics	16.8%	17.4%	17.1%	17.4%
Gynaecology	7.4%	7.3%	6.9%	6.6%
Urology	6.3%	6.0%	5.9%	5.9%
Cardiology	5.6%	5.5%	6.0%	6.2%
Geriatric medicine	4.2%	4.5%	4.3%	4.5%
ENT	3.2%	3.2%	3.1%	2.7%
All other specialties	16.4%	16.7%	17.6%	18.0%
Total number of specific responses	80780	80684	75931	72576

Appendix 7: Sample information for all respondents

	Year of survey			
	2005	2006	2007	2008
Single overnight stay	26.4%	27.7%	29.1%	29.8%
Overnight stay 2-5 nights	40.5%	39.8%	39.7%	39.6%
Overnight stay 6-10 nights	18.9%	18.4%	17.5%	17.1%
Overnight stay 11-15 nights	6.4%	6.3%	6.1%	6.1%
Overnight stay more than 15 nights	7.8%	7.8%	7.5%	7.4%
Total specific responses	78239	80686	75931	72576
Missing	2554	8	18	8

Proportions of those responding to the survey by length of stay

Answered by all - data taken from sample data

Proportions of those responding to the survey by specialty

	Year of survey				
	2005	2006	2007	2008	
General medicine	20.9%	20.6%	20.5%	20.6%	
General surgery	19.0%	18.8%	18.5%	18.2%	
Trauma and orthopaedics	16.8%	17.4%	17.1%	17.4%	
Gynaecology	7.4%	7.3%	6.9%	6.6%	
Urology	6.3%	6.0%	5.9%	5.9%	
Cardiology	5.6%	5.5%	6.0%	6.2%	
Geriatric medicine	4.2%	4.5%	4.3%	4.5%	
ENT	3.2%	3.2%	3.1%	2.7%	
All other specialties	16.4%	16.7%	17.6%	18.0%	
Total specific responses	80780	80684	75931	72576	
Missing	13	10	18	8	

Answered by all - data taken from sample data