Patient survey report 2013



Survey of adult inpatients 2013 Liverpool Women's NHS Foundation Trust

Survey of adult inpatients 2013



Making patients' views count

National NHS patient survey programme Survey of adult inpatients 2013

The Care Quality Commission

The Care Quality Commission (CQC) is the independent regulator of health and adult social care in England.

Our purpose is to make sure hospitals, care homes, dental and GP surgeries, and all other care services in England provide people with safe, effective, compassionate and high-quality care, and we encourage them to make improvements.

Our role is to monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety, and to publish what we find, including performance ratings to help people choose care.

Survey of adult inpatients 2013

To improve the quality of services that the NHS delivers, it is important to understand what patients think about their care and treatment. One way of doing this is by asking patients who have recently used their local health services to tell us about their experiences.

Information drawn from the survey will be used by the Care Quality Commission as part of our new Hospital Intelligent Monitoring. NHS England will use the results to check progress and improvement against the objectives set out in the NHS mandate, and the Department of Health will hold them to account for the outcomes they achieve. The Trust Development Authority will use the results to inform the quality and governance assessment as part of their Oversight Model for NHS Trusts.

The eleventh survey of adult inpatients involved 156 acute and specialist NHS trusts. We received responses from just over 62,400 patients, which is a response rate of 49%. Patients were eligible for the survey if they were aged 16 years or older, had spent at least one night in hospital and were not admitted to maternity or psychiatric units. Trusts were given the choice of sampling from June, July or August 2013. Trusts counted back from the last day of their chosen month, including every consecutive discharge, until they had selected 850 patients (or, for a small number of specialist trusts who could not reach the required sample size, until they had reached 1st January 2013). Fieldwork took place between September 2013 and January 2014.

Similar surveys of adult inpatients were also carried out in 2002 and from 2004 to 2012. They are part of a wider programme of NHS patient surveys, which cover a range of topics including maternity, outpatient and A&E services, ambulances, and community mental health services. To find out more about our programme and for the results from previous surveys, please see the links contained in the further information section.

Interpreting the report

This report shows how a trust scored for each question in the survey, compared with the range of results from all other trusts that took part. It uses an analysis technique called the 'expected range' to determine if your trust is performing 'about the same', 'better' or 'worse' compared with other trusts. For more information, please see the 'methodology' section below. This approach is designed to help understand the performance of individual trusts, and to identify areas for improvement.

A 'section' score is also provided, labelled S1-S10 in the 'section scores' on page 6. The scores for each question are grouped according to the sections of the questionnaire, for example, 'the hospital and ward,' 'doctors and nurses' and so forth.

This report shows the same data as published on the CQC website (www.cqc.org.uk/surveys/inpatient). The CQC website displays the data in a more simplified way, identifying whether a trust performed 'better,' 'worse' or 'about the same' as the majority of other trusts for each question and section.

Standardisation

Trusts have differing profiles of patients. For example, one trust may have more male inpatients than another trust. This can potentially affect the results because people tend to answer questions in different ways, depending on certain characteristics. For example, older respondents tend to report more positive experiences than younger respondents, and women tend to report less positive experiences than men. This could potentially lead to a trust's results appearing better or worse than if they had a slightly different profile of patients.

To account for this, we 'standardise' the data. Results have been standardised by the age, sex and method of admission (emergency or elective) of respondents to ensure that no trust will appear better or worse than another because of its respondent profile. This helps to ensure that each trust's age-sex-admission type profile reflects the national age-sex-admission type distribution (based on all of the respondents to the survey). It therefore enables a more accurate comparison of results from trusts with different profiles of patients. In most cases this will not have a large impact on trust results; it does, however, make comparisons between trusts as fair as possible.

Scoring

For each question in the survey, the individual (standardised) responses are converted into scores on a scale from 0 to 10. A score of 10 represents the best possible response and a score of zero the worst. The higher the score for each question, the better the trust is performing. It is not appropriate to score all questions in the questionnaire as not all of the questions assess the trusts in any way, for example, they may be descriptive questions such as Q1 asking respondents if their inpatient stay was planned in advance or an emergency; or they may be 'routing questions' designed to filter out respondents to whom following questions do not apply. An example of a routing question would be Q41 "During your stay in hospital, did you have an operation or procedure?"

Graphs

The graphs in this report display the range of scores achieved by all trusts taking part in the survey, from the lowest score achieved (left hand side) to the highest score achieved (right hand side). The black diamond shows the score for your trust. The graph is divided into three sections:

- If your trust's score lies in the orange section of the graph, its result is 'about the same' as most other trusts in the survey.
- If your trust's score lies in the red section of the graph, its result is 'worse' compared with most other trusts in the survey.
- If your trust's score lies in the green section of the graph, its result is 'better' compared with most other trusts in the survey.

The text to the right of the graph clearly states whether the score for your trust is 'better' or 'worse' compared with most other trusts in the survey. If there is no text the score is 'about the same.' These groupings are based on a rigorous statistical analysis of the data, as described in the following 'methodology' section.

Methodology

The categories described above are based on a statistic called the 'expected range' which is uniquely calculated for each trust for each question. This is the range within which we would expect a trust to score if it performed 'about the same' as most other trusts in the survey. The range takes into account the number of respondents from each trust as well as the scores for all other trusts. This means that where a trust is performing 'better' or 'worse' than the majority of other trusts, it is very unlikely to have occurred by chance.

In some cases there will be no red and/or no green area in the graph. This happens when the expected range for your trust is so broad it encompasses either the highest possible score (no green section) or the lowest possible score (no red section).

Please note that if fewer than 30 respondents have answered a question, no score will be displayed for this question (or the corresponding section). This is because the uncertainty around the result is too great.

A technical document providing more detail about the methodology and the scoring applied to each question is available on the CQC website (see further information section).

Tables

At the end of the report you will find tables containing the data used to create the graphs and background information about the patients that responded.

Scores from last year's survey are also displayed. The column called 'change from 2012' uses arrows to indicate whether the score for this year shows a statistically significant increase (up arrow), a statistically significant decrease (down arrow) or has shown no statistically significant change (no arrow) compared with 2012. A statistically significant difference means that the change in the results is very unlikely to have occurred by chance. Significance is tested using a two-sample t-test.

Where a result for 2012 is not shown, this is because the question was either new this year, or the question wording and/or the response categories have been changed. It is therefore not possible to compare the results as we do not know if any change is caused by alterations in the survey instrument, or variation in a trust's performance. Comparisons are also not able to be shown if your trust has merged with other trusts since the 2012 survey. Please note that comparative data is not shown for sections as the questions contained in each section can change year on year.

Notes on specific questions

Please note that a variety of acute trusts take part in this survey and not all questions are applicable to every trust. The section below details modifications to certain questions, in some cases this will apply to all trusts, in other cases only to applicable trusts.

All trusts

Q11 and Q13: The information collected by Q11 "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?" and Q13 "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?" are presented together to show whether the patient has ever shared a sleeping area with patients of the opposite sex. The combined question is numbered in this report as Q11 and has been reworded as "Did you ever share a sleeping area with patients of the opposite sex?"

Please note that the information based on Q11 cannot be compared to similar information collected from surveys prior to 2006. This is due to a change in the questions' wording and because the results for 2006 onwards have excluded patients who have stayed in a critical care area, which almost always accommodates patients of both sexes.

Q51 and Q52: The information collected by Q51 "On the day you left hospital, was your discharge delayed for any reason?" and Q52 "What was the main reason for the delay?" are presented together to show whether a patient's discharge was delayed by reasons attributable to the hospital. The combined question in this report is labelled as Q52 and is worded as: "Discharge delayed due to wait for medicines/to see doctor/for ambulance."

Q53: Information from Q51 and Q52 has been used to score Q53 "How long was the delay?" This assesses the length of a delay to discharge for reasons attributable to the hospital.

Trusts with female patients only

Q11, Q13 and Q14: If your trust offers services to women only, a trust score for Q11 "Did you ever share a sleeping area with patients of the opposite sex?" and Q14 "While staying in hospital, did you ever use the same bathroom or shower area as patients of the opposite sex?" is not shown.

Trusts with no A&E Department

Q3 and Q4: The results to these questions are not shown for trusts that do not have an A&E Department.

Further information

The full national results are on the CQC website, together with an A to Z list to view the results for each trust (alongside the technical document outlining the methodology and the scoring applied to each question):

www.cqc.orq.uk/Inpatientsurvey2013

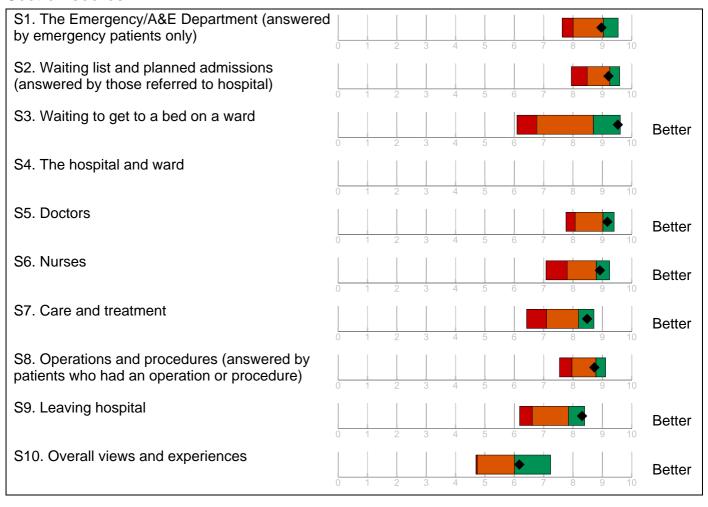
The results for the adult inpatient surveys from 2002 to 2012 can be found at: http://www.nhssurveys.org/surveys/425

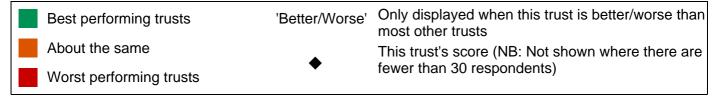
Full details of the methodology of the survey can be found at: http://www.nhssurveys.org/surveys/705

More information on the programme of NHS patient surveys is available at: www.cqc.org.uk/public/reports-surveys-and-reviews/surveys

More information about how CQC monitors hospitals is available on the CQC website at: http://www.cqc.org.uk/public/hospital-intelligent-monitoring

Section scores

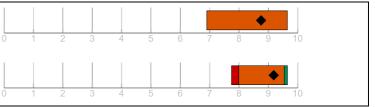




The Emergency/A&E Department (answered by emergency patients only)

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

Q4. Were you given enough privacy when being examined or treated in the A&E Department?

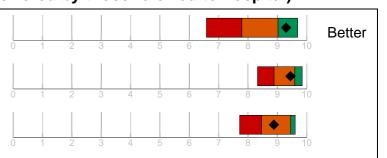


Waiting list and planned admissions (answered by those referred to hospital)

Q6. How do you feel about the length of time you were on the waiting list?

Q7. Was your admission date changed by the hospital?

Q8. Had the hospital specialist been given all necessary information about your condition/illness from the person who referred you?



Waiting to get to a bed on a ward

Q9. 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?



Best performing trusts

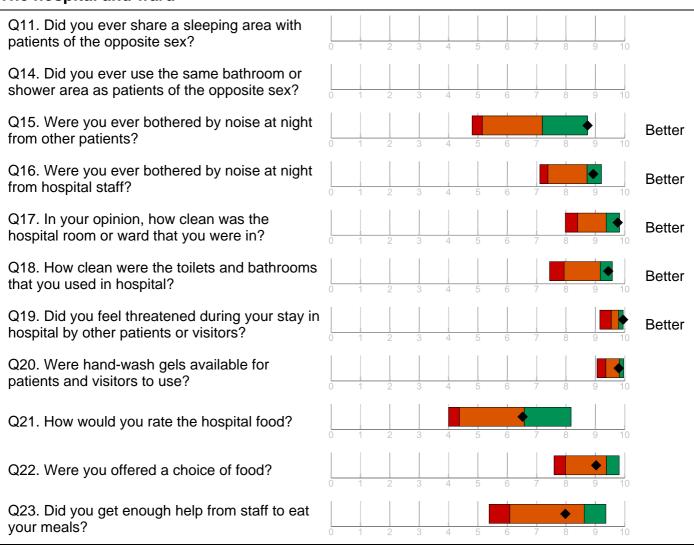
About the same

Worst performing trusts

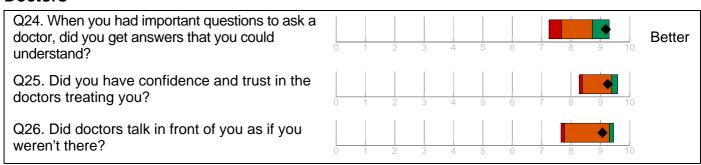
'Better/Worse' Only displayed when this trust is better/worse than most other trusts

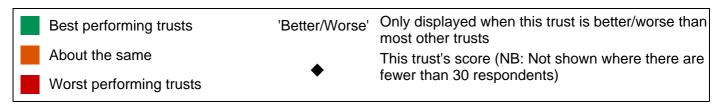
This trust's score (NB: Not shown where there are fewer than 30 respondents)

The hospital and ward

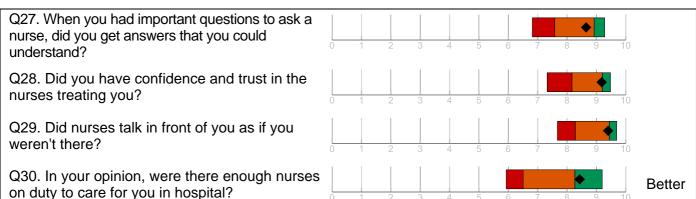


Doctors

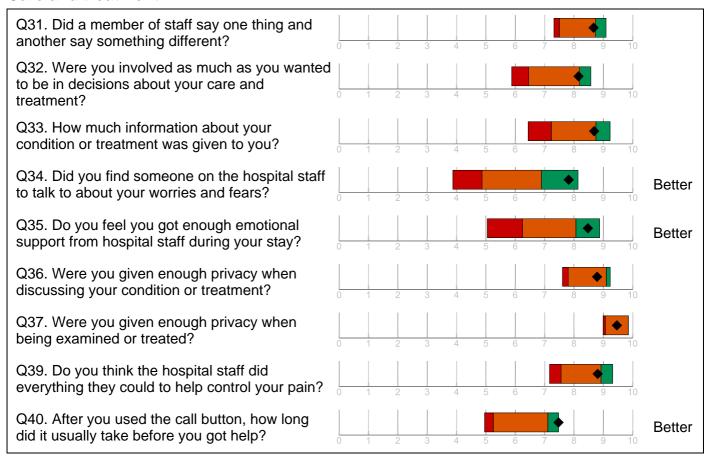


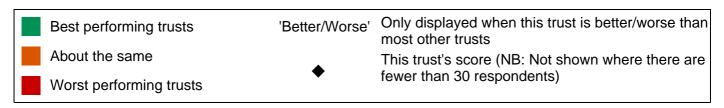


Nurses

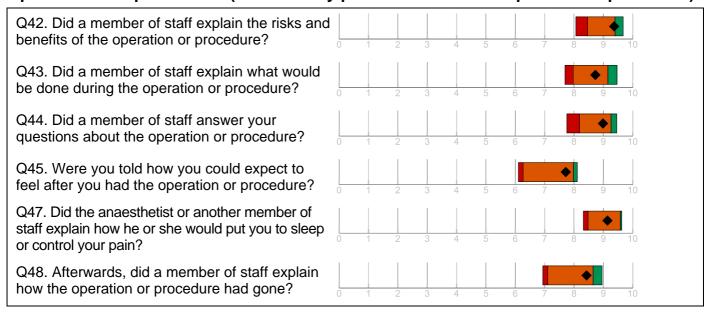


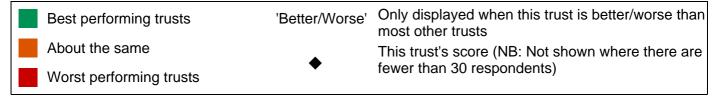
Care and treatment



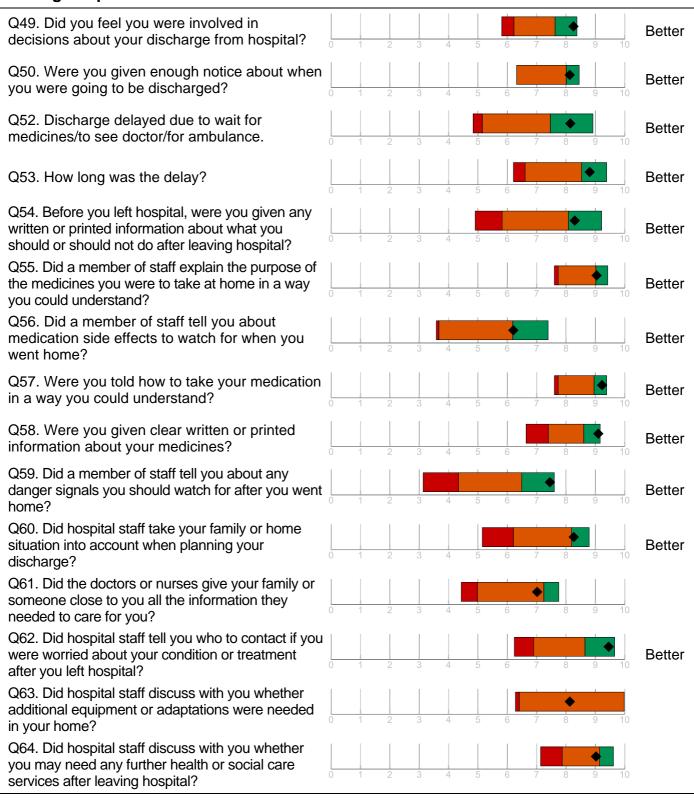


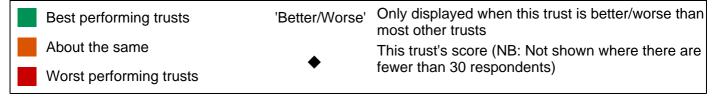
Operations and procedures (answered by patients who had an operation or procedure)





Leaving hospital





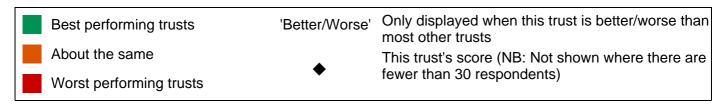
Q65. Did you receive copies of letters sent between hospital doctors and your family doctor (GP)?

Q66. Were the letters written in a way that you could understand?

Better

Overall views and experiences





	erpool Women's NHS Foundation Trust	Scores for this NHS trust	Lowest trust score achieved	Highest trust score achieved	Number of respondents (this trust)	2012 scores for this NHS trust	Change from 2012
	Emergency/A&E Department (answered by emergency	-					
S1	Section score	9.0	7.6	9.5			
Q3	While you were in the A&E Department, how much information about your condition or treatment was given to you?	8.8	7.3	9.4	33	8.1	
Q4	Were you given enough privacy when being examined or treated in the A&E Department?	9.2	7.7	9.6	38	8.9	
Wa	iting list and planned admissions (answered by those re	ferre	d to	hosp	ital)		
S2	Section score	9.2	7.9	9.6			
Q6	How do you feel about the length of time you were on the waiting list?	9.3	6.6	9.7	404	9.1	
Q7	Was your admission date changed by the hospital?	9.4	8.3	9.8	409	9.3	
Q8	Had the hospital specialist been given all necessary information about your condition/illness from the person who referred you?	8.9	7.7	9.6	403		
Wa	iting to get to a bed on a ward						
S3	Section score	9.5	6.1	9.6			
Q9	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?	9.5	6.1	9.6	455	8.6	↑

Liverpool Women's NHS Foundation Trust	Scores for this NHS trust	Lowest trust score achieved	Highest trust score achieved	Number of respondents (this trust)	2012 scores for this NHS trust	Change from 2012
The hospital and ward						
S4 Section score	-	7.5	9.1			
Q11 Did you ever share a sleeping area with patients of the opposite sex?	-	7.0	9.9			
Q14 Did you ever use the same bathroom or shower area as patients of the opposite sex?	-	6.2	9.8			
Q15 Were you ever bothered by noise at night from other patients?	8.7	4.8	8.7	449	7.5	\uparrow
Q16 Were you ever bothered by noise at night from hospital staff?	8.9	7.1	9.2	449	8.4	
Q17 In your opinion, how clean was the hospital room or ward that you were in?	9.8	8.0	9.8	451	9.5	
Q18 How clean were the toilets and bathrooms that you used in hospital?	9.4	7.4	9.6	452	9.1	
Q19 Did you feel threatened during your stay in hospital by other patients or visitors?	9.9	9.2	9.9	452	9.9	
Q20 Were hand-wash gels available for patients and visitors to use?	9.8	9.1	10.0	439	9.7	
Q21 How would you rate the hospital food?	6.5	4.0	8.2	434	6.0	
Q22 Were you offered a choice of food?	9.0	7.6	9.8	453	8.9	
Q23 Did you get enough help from staff to eat your meals?	8.0	5.4	9.4	104	9.5	\downarrow
Doctors						
S5 Section score	9.2	7.8	9.4			
Q24 When you had important questions to ask a doctor, did you get answers that you could understand?	9.2	7.2	9.3	414	8.4	↑
Q25 Did you have confidence and trust in the doctors treating you?	9.3	8.3	9.6	452	9.0	
Q26 Did doctors talk in front of you as if you weren't there?	9.1	7.7	9.4	452	9.3	
Nurses						
S6 Section score	8.9	7.1	9.2			
Q27 When you had important questions to ask a nurse, did you get answers that you could understand?	8.7	6.8	9.3	407	8.8	
Q28 Did you have confidence and trust in the nurses treating you?	9.2	7.3	9.5	454	8.9	
Q29 Did nurses talk in front of you as if you weren't there?	9.4	7.7	9.7	446	9.0	
Q30 In your opinion, were there enough nurses on duty to care for you in hospital?	8.4	5.9	9.2	455	7.7	
↑ or ↓ Indicates where 2013 score is significantly higher or lowe	er than	2013) score	<u> </u>		

Survey of adult inpatients 2013	
Liverpool Women's NHS Foundation Trus	st

Liverpool Women's NHS Foundation Trust	Scores for this NHS trust	Lowest trust score achieved	Highest trust score achieved	Number of respondents (this trust)	2012 scores for this NHS trust	Change from 2012
Care and treatment						
S7 Section score	8.5	6.4	8.7			
Q31 Did a member of staff say one thing and another say something different?	8.7	7.3	9.1	452	8.3	
Q32 Were you involved as much as you wanted to be in decisions about your care and treatment?	8.2	5.9	8.6	449	7.8	
Q33 How much information about your condition or treatment was given to you?	8.7	6.4	9.2	453	7.9	
Q34 Did you find someone on the hospital staff to talk to about your worries and fears?	7.8	3.9	8.1	272	7.2	
Q35 Do you feel you got enough emotional support from hospital staff during your stay?	8.5	5.0	8.9	326	7.6	
Q36 Were you given enough privacy when discussing your condition or treatment?	8.8	7.6	9.2	451	8.4	
Q37 Were you given enough privacy when being examined or treated?	9.5	9.0	9.8	453	9.5	
Q39 Do you think the hospital staff did everything they could to help control your pain?	8.8	7.2	9.3	336	8.4	
Q40 After you used the call button, how long did it usually take before you got help?	7.5	5.0	7.5	264	6.6	
Operations and procedures (answered by patients who had	l an c	nors	tion	or nr	ncedi	ura)
S8 Section score	8.7	7.5	9.1	o. p.	Joou	ui Oj
Q42 Did a member of staff explain the risks and benefits of the operation or procedure?	9.4	8.1	9.7	427	9.0	
Q43 Did a member of staff explain what would be done during the operation or procedure?	8.7	7.7	9.5	422	8.4	
Q44 Did a member of staff answer your questions about the operation or procedure?	9.0	7.8	9.5	381	9.1	
Q45 Were you told how you could expect to feel after you had the operation or procedure?	7.7	6.1	8.1	433	7.2	
Q47 Did the anaesthetist or another member of staff explain how he or she would put you to sleep or control your pain?	9.1	8.3	9.6	421	9.2	
Q48 Afterwards, did a member of staff explain how the operation or procedure had gone?	8.4	6.9	9.0	425	8.1	

Liverpool Women's NHS Foundation Trust	Scores for this NHS trust	Lowest trust score achieved	Highest trust score achieved	Number of respondents (this trust)	2012 scores for this NHS trust	Change from 2012
Leaving hospital						
S9 Section score	8.3	6.2	8.4			
Q49 Did you feel you were involved in decisions about your discharge from hospital?	8.3	5.8	8.4	447	8.0	
Q50 Were you given enough notice about when you were going to be discharged?	8.1	6.3	8.4	449	8.4	
Q52 Discharge delayed due to wait for medicines/to see doctor/for ambulance.	8.1	4.8	8.9	427	7.5	
Q53 How long was the delay?	8.8	6.2	9.4	426	8.6	
Q54 Before you left hospital, were you given any written or printed information about what you should or should not do after leaving hospital?	8.3	4.9	9.2	445	7.9	
Q55 Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?	9.0	7.6	9.4	392	9.1	
Q56 Did a member of staff tell you about medication side effects to watch for when you went home?	6.2	3.6	7.4	332	6.6	
Q57 Were you told how to take your medication in a way you could understand?	9.2	7.6	9.4	364	8.6	
Q58 Were you given clear written or printed information about your medicines?	9.1	6.6	9.2	355	8.6	
Q59 Did a member of staff tell you about any danger signals you should watch for after you went home?	7.5	3.1	7.6	402	7.0	
Q60 Did hospital staff take your family or home situation into account when planning your discharge?	8.3	5.1	8.8	338	7.8	
Q61 Did the doctors or nurses give your family or someone close to you all the information they needed to care for you?	7.0	4.4	7.8	302	6.2	
Q62 Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?	9.5	6.2	9.7	438	8.7	
Q63 Did hospital staff discuss with you whether additional equipment or adaptations were needed in your home?	8.1	6.3	9.4	54	8.8	
Q64 Did hospital staff discuss with you whether you may need any further health or social care services after leaving hospital?	9.0	7.1	9.6	167	8.6	
Q65 Did you receive copies of letters sent between hospital doctors and your family doctor (GP)?	7.5	2.3	9.3	412	7.2	
Q66 Were the letters written in a way that you could understand?	9.2	7.3	9.3	309	9.1	

Liverpool Women's NHS Foundation Trust	Scores for this NHS trust	Lowest trust score achieved	Highest trust score achieved	Number of respondents (this trust)	2012 scores for this NHS trust	Change from 2012
Overall views and experiences						
S10 Section score	6.2	4.7	7.2			
Q67 Overall, did you feel you were treated with respect and dignity while you were in the hospital?	9.4	7.9	9.7	450	8.9	
Q68 Overall	8.7	7.1	9.1	441	8.4	
Q69 During your hospital stay, were you ever asked to give your views on the quality of your care?	2.5	0.9	4.6	382	2.2	
Q70 Did you see, or were you given, any information explaining how to complain to the hospital about the care you received?	4.1	1.3	5.9	324	2.9	

Indicates where 2013 score is significantly higher or lower than 2012 score (NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2012 data is available.

↑ or ↓

Background information

The sample	This trust	All trusts
Number of respondents	456	62443
Response Rate (percentage)	54	49
Demographic characteristics	This trust	All trusts
Gender (percentage)	(%)	(%)
Male	0	46
Female	100	54
Age group (percentage)	(%)	(%)
Aged 16-35	11	7
Aged 36-50	29	12
Aged 51-65	33	24
Aged 66 and older	27	57
Ethnic group (percentage)	(%)	(%)
White	94	89
Multiple ethnic group	1	1
Asian or Asian British	2	3
Black or Black British	1	1
Arab or other ethnic group	0	0
Not known	2	6
Religion (percentage)	(%)	(%)
No religion	11	16
Buddhist	0	0
Christian	85	78
Hindu	0	1
Jewish	0	1
Muslim	1	2
Sikh	0	0
Other religion	0	1
Prefer not to say	1	2
Sexual orientation (percentage)	(%)	(%)
Heterosexual/straight	97	94
Gay/lesbian	0	1
Bisexual	0	0
Other	0	1
Prefer not to say	1	4