AGENDA ITEM No:

UNIVERSITY HOSPITAL BIRMINGHAM NHS FOUNDATION TRUST REPORT TO THE BOARD OF DIRECTORS THURSDAY 24 JUNE 2010

Title:	2009 NATIONAL ACUTE INPATIENT SURVEY REPORT
Responsible Director:	Kay Fawcett – Executive Chief Nurse
Contact:	Carol Rawlings – Associate Director for Patient Affairs x53608

Purpose:	To provide a summary of the comparative results of the national inpatient survey conducted in October 2009, published by the Care Quality Commission in May 2010.
Confidentiality Level & Reason:	None.
Medium Term Plan Ref:	Always consider the needs and care of patients first.
Key Issues Summary:	Improve measurable outcomes for patient satisfaction
Recommendations:	The Board is asked to:
	Note the 2009 Care Quality Commission National Acute Inpatient survey report which provides a comparison of the results from NHS Trusts.
	Note the mean rating score comparison with previous surveys.
	3. Note the contents of this report and the key findings of the survey.
	Note the conclusion and next steps, and agree to receive updates through the Care Quality report.

Signed	Date	15 JUNE 2010	
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UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST

REPORT TO THE BOARD OF DIRECTORS

THURSDAY 24 JUNE 2010

2009 NATIONAL ACUTE INPATIENT SURVEY BENCHMARKS AGAINST OTHER NHS TRUSTS

PRESENTED BY THE CHIEF NURSE

1. Introduction

The Trust is required, on an annual basis, to participate in the Care Quality Commission's National Patient Survey. For the last five years the Care Quality Commission (formerly Healthcare Commission) has concentrated on surveying adult inpatients in the acute setting. This paper presents the report of the 2009 survey results comparing with all the NHS Trusts in England. In mid May 2010 the Care Quality Commission published the results on their website. The Commission has also produced a simplified scoring system, which they have published on the NHS Choices website for the benefit of the public.

The aim of the survey is to understand what patients think about their experience and care within NHS Trusts. This should then be used to drive improvements in the quality of the experience and care to be made.

This report presents the comparative results, as published by the Care Quality Commission, and highlights areas where University Hospitals Birmingham (UHB) compared well against other Trusts, and where we compared less favorably. Results are benchmarked to indicate which were in the highest 20% of Trusts, which were in lowest 20% of Trusts, and which were in the remaining 60% of Trusts.

The following appendix is attached to this report:

the bedside TV results

Appendix 1 Comparative scores as presented by the Care Quality Commission

Appendix 2 Mean scores compared with surveys from previous years and

Appendix 3 Summary information published on NHS Choices

2. **Methodology**

The 850 patients selected to take part in the survey had been consecutively discharged following at least a one night stay during June 2009. A 50% response rate was achieved an increase of 1% on the previous year.

The scores for each Trust are calculated using a scale of 0-100. A score of 100 indicates the best possible response. If less than 30 patients responded to an individual question, the score is not included in the final report as it is not considered valid. Since the score is based on a sample of inpatients, the score may not be the same as if everyone had been surveyed and had responded. A confidence interval of 95% has been calculated by the Care Quality Commission to indicate how accurate they consider the score to be.

3. Comparison with National Benchmarks

Of the 64 questions reported on, three questions were new to this survey (Q.26, 27 & 71). Nine (14%) came within the top 20% of Trusts, 37 (58%) were in the middle 60% of Trusts and 18 (28%) fell within the lowest 20% of Trusts (Appendix 1).

Against the 2008 survey results, this shows an improvement of 6% for responses in the top 20% of Trusts, a decrease of 16% which were in the middle 20%, and an increase of 15% which were in the lowest 20%.

4. Mean Rating Scores Comparison with Previous Years and with the Bedside Survey

To demonstrate how the Trust is performing against the scores for previous surveys a table showing the mean rating scores is provided in **Appendix 2.**

The comparison against the 61 questions used in previous surveys shows little significant movement, i.e. more than + or - 5 points. Five questions show an improved score of +5 points or more, although Q61 is not directly comparable due to the change in scoring mechanism used. There are also five questions that show a less favorable response of -5 or more points.

A comparison is also shown against the real time results of the 11 questions used in the bedside survey for 2009-10. These are the responses given by patients during their stay. Eight of the responses show a more favorable score than those in the benchmark report, and three a less favorable response.

5. **Key Findings**

Summarised below are the key benchmark comparisons with national NHS Trusts.

5.1 Admission to Hospital

Four of the eight questions within this section benchmarked with the middle 60% of Trusts. Three were in the lowest 20% of Trusts, relating to length of time on the waiting list, choice of admission date and changed admission date. Responses to information given in A&E were in the top 20% of Trusts, demonstrating a significant improvement in the previous survey.

5.2 Hospital and Ward

Of the 13 questions within this section, seven benchmarked with the lowest 20% of Trusts and six with the middle 60% of Trusts.

However, eight areas showed an improvement on 2008 scores. The responses to mixed sex accommodation, noise at night, cleanliness, food and help to eat meals, and care of personal belongings all improved.

When compared with the bedside survey rating of hospital food scored significantly better achieving a score of 67, compared with a score of 50 in the benchmark report. Hospital and ward cleanliness also scored five points more in the bedside survey. However, noise at night from staff scored significantly lower (56) than the benchmark report (74).

5.3 <u>Doctors</u>

Three of the four questions benchmarked scored in the middle 60% of Trusts and one in the lowest 20%. There was an improvement with one of the scores, notably doctors cleaning their hands between patients.

The scores of the bedside survey for doctors talking in front of patients as if they weren't there, and cleaning hands between patients are not directly comparable as the question groups all staff together. However, staff talking in front of patients did attract a more favorable score in the bedside survey, but staff washing their hands was less favorable then the benchmark report.

5.4 Nurses

Four of the five questions regarding nurses were in the middle 60% of Trusts and one in the bottom 20% (nurses talking as if you weren't there). This also showed significant unfavorable movement from the 2008 results, as did the question relating to confidence and trust.

The scores of the bedside survey for nurses talking in front of patients as if they weren't there, and cleaning hands between patients are not directly comparable as the question groups all staff together. However, staff talking in front of patients did attract a more favorable score in the bedside survey, but staff washing their hands was less favorable then the benchmark report.

5.5 Care and Treatment

Of the nine questions benchmarked, five were within the middle 60% of Trusts and one was in the top 20% of Trusts. This related to information about condition and treatment. Three were in the bottom 20% of Trusts, which related to privacy and to management of pain.

Three of the questions are also used in the bedside survey, of which two attracted a more favorable score, significantly more for involvement in decisions about care and treatment (+10).

5.6 Operations and Procedures

Benchmarks for all six questions in this section were in the middle 60% of Trusts. There was no significant movement in scores from the previous survey.

5.7 <u>Leaving Hospital</u>

Of the 13 questions benchmarked, seven scored in the top 20% of Trusts, four scored within the middle 60% of Trusts, and two within the lowest 20%. The lowest benchmarks related to delays in discharge.

One score, relating to explanation of medication side effects showed a decrease of seven points on the previous score.

5.8 Overall

Of the six questions reported on in this section, five were in the middle 60% of Trusts and one in the lowest 20% of Trusts. This related to whether or not the patient wanted to complain.

Two of the questions are used in the bedside survey relating to dignity and respect and overall rating of care, both of which scored more favorably in the bedside survey.

6. **CQUINS**

As part of the measurement for CQUINS in 2010 -11 the Trust is required to include the following questions in patient experience surveys:

- 1) Were you involved as much as you wanted to be in decisions about your care and treatment?
- 2) Did you find someone on the hospital staff to talk to about your worries and fears?
- 3) Were you given enough privacy when discussing your condition or treatment?
- 4) Did a member of staff tell you about medication side effects to watch for when you went home?
- 5) Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?
- 6) Did staff do all they could to control pain?

These questions pick up some of the areas identified by the benchmark report as areas for improvement. They will be included in the bedside survey and the telephone survey to provide real time data which can then be used by the Care Quality Group to target specific areas.

7. Conclusion and Next Steps

The overall results of the 2009 benchmark report places UHB as about the same as other Acute NHS Trusts (**Appendix 3**). The experience of patients is generally very positive and they feel that they are treated with dignity and

respect. Compared with the results for 2008, the 2009 benchmark scores demonstrate a significant improvement in five areas – information in A&E, overall wait to be admitted, mixed sex accommodation, help with meals and delays in discharge.

However, it also highlights five areas where scores were less favorable than 2008. These are, choice of admission dates, confidence and trust in nurses, nurses talking in front of patients as if not there, pain control and information regarding medication side effects.

Comparison with the results of the bedside survey shows that the results for six of the eleven questions are generally very similar. Of the remaining five questions, hospital food, staff talking in front of patients and involvement in decisions, all showed a more positive score, and noise at night showed a significant less favorable score on the bedside survey.

Further drill down of the feedback from patients from other routes is being done by the Care Quality Group to enable a better understanding of the factors that contribute to the areas of the patient experience that need improvement. This information is being used to form the basis of action plans developed with the clinical Divisions, with monitoring taking place through the Care Quality Group.

The group will agree standards of care and patient experience and will continue to use a variety of feedback methods to monitor performance against these standards. Progress will be reported to the Board of Directors via the Care Quality report.

8. Recommendations

The Board is asked to:

- 8.1 **Note** the 2009 Care Quality Commission National Acute Inpatient survey report which provides a comparison of the results from NHS Trusts.
- 8.2 **Note** the mean rating score comparison with previous surveys and the bedside survey.
- 8.3 **Note** the contents of this report and the key findings of the survey.
- 8.4 **Note** the conclusion and next steps, and agree to receive updates through the Care Quality report.

Kay Fawcett
Executive Chief Nurse
15 June 2010

APPENDIX 1

CARE QUALITY COMMISSION COMPARATIVE BENCHMARK REPORT

APPENDIX 2

MEAN SCORES 2007 – 2009 AND COMPARISON WITH BEDSIDE SURVEY

APPENDIX 3

SUMMARY INFORMATION PUBLISHED ON NHS CHOICES

University Hospitals Birmingham Inpatient 2009 Mean Rating Scores 2007 - 2009

Bedside TV Survey Results

		Survey				
Question	2009	+/-	2008	2007	2009/ 2010	
Q3 Enough information about condition in A&E	84	+8	76	78		
Q4 Enough privacy when examined in A&E	88	+1	87	87		
Q5 Wait to be admitted to ward	61	+2	59	59		
Q8 Overall wait to be admitted	65	+5	60	56		
Q9 View on time on waiting list	80	-3	83	81		
Q10 Choice of admission dates	22	-9	31	21		
Q11 Admission date changed by hospital	89	-1	90	92		
Q12 Did patient wait a long time to get to a bed	82		82	86		
Q14 Shared mixed-sex room or bay	69	+6	63	66		
Q19 Mixed-sex bathroom or shower areas	70	+3	67	67		
Q20 Ever bothered by noise at night from patients	61	+2	59	55		
Q21 Ever bothered by noise at night from staff	74	-1	75	75	56	
Q22 Cleanliness of room or ward	84	+2	82	79	89	
Q23 Cleanliness of toilets and bathrooms	76	+2	74	72	77	
Q24 Ever feel threatened	93	-2	95	94		
Q25 Place for personal belongings	61	+1	60	58		
Q26 Did you see posters / leaflets re hand washing	97					
Q27 Were hand washing gels available for patients and visitors to use	97					
Q28 Rating of food	50	+1	49	48	67	
Q29 Choice of food	84		84	87		
Q30 Help to eat meals	70	+5	65	70		
Q31 Getting answers to questions from doctors	81		81	80		
Q32 Confidence and trust in doctors	89	-3	92	90		
Q33 Did doctors talk in front of you as if you weren't there	80	-2	82	82	88**	
Q34 Did doctors wash hands	84	+3	81	75	82**	
Q35 Getting answers to questions from nurses	78	-4	82	79		
Q36 Confidence and trust in nurses	83	-5	88	84		
Q37 Did nurses talk in front of you as if you weren't there	84	-5	89	88	88**	
Q38 Were there enough nurses on duty	73		73	74		
Q39 Did nurses wash hands	87	-1	88	83	82**	
Q40 Did staff contradict each other	79	+1	78	77	77	
Q41 Involvement in decisions about care and treatment	70	-2	72	67	80	
Q42 Amount of information	83	+3	80	80		

Question	2009	+/-	2008	2007	2009/ 2010
Q43 Could family talk with doctor	64	-3	67	63	
Q44 Someone to discuss worries or fears	61	+1	60	63	
Q45 Amount of privacy when discussing treatment	78	-1	78	77	
Q46 Amount of privacy when being examined or treated	92	+2	90	94	95
Q48 Did staff do all they could to control pain	80	-5	85	84	
Q49 Time for help to arrive	62	-3	65	64	
Q51 Were risks and benefits of the operation explained	89	-2	91	86	
Q52 Was what would done during the operation explained	85	-1	86	83	
Q53 Were questions about the operation answered	87	+2	85	85	
Q54 Told how would feel after operation	70	-3	73	69	
Q56 Did anaesthetist explain how would control pain	90	-3	93	87	
Q57 Were you told how the operation had gone in understandable way	78	-1	79	78	
Q58 Involved in discharge decisions	69	-1	70	67	
Q60 Main reason for discharge delay	55	+4*	51	55	
Q61 How long was discharge delay	68	+37*	31	33	
Q62 Written or printed discharge information	77	-2	79	74	
Q63 Was the purpose of new medicines explained	86	-1	87	83	
Q64 Were the side-effects of the new medicines explained	46	-7	53	48	
Q65 Told how to take medication	81	-4	85	84	
Q66 Given printed information on medicines	78	-2	80	77	
Q67 Told about danger signals on discharge	56	-3	59	54	
Q68 Family given all information on discharge	61	-1	62	56	
Q69 Were you told who to contact if worried	84	-1	85	83	
Q70 Given copies of letters to GP	71	-3	74	67	
Q71 Letters written in a way you could understand	85				
Q72 Overall were you treated with respect and dignity	89	+1	88	89	92
Q73 Overall rating of staff working together	78		78	79	
Q74 Overall rating of care	78	-1	79	79	82
Q75 Ever asked views on quality	9		9	4	
Q76 Leaflets on how to complain	45	+1	44	40	
Q77 Ever wanted to complain	90	-4	94	94	

^{*}Information from Q59 ('on the day you left hospital, was your discharge delayed for any reason') has been used to score the results for Q60 & Q61.

Notes

Overall, as there has been a movement of less than + or - 5 points the results show very little statistically significant movement between this and previous years results. The results from the bedside survey are not directly comparable with the results from the National Survey as they are not weighted in the same way, so can only give an indication when compared to the national results.

^{**} these figures are the same for doctors and nurses as the question asked on the bedside survey does not differentiate between staff groups.

Patient survey report 2009



Survey of adult inpatients in the NHS 2009 University Hospital Birmingham NHS Foundation Trust

The national survey of adult inpatients in the NHS 2009 was designed, developed and co-ordinated by the Acute Surveys Co-ordination Centre for the NHS Patient Survey Programme at Picker Institute Europe.



National NHS patient survey programme Survey of adult inpatients in the NHS 2009

The Care Quality Commission

The Care Quality Commission is the independent regulator of health and adult social care services in England. We also protect the interests of people whose rights are restricted under the Mental Health Act.

Whether services are provided by the NHS, local authorities, private companies or voluntary organisations, we make sure that people get better care. We do this by:

- Driving improvement across health and adult social care.
- Putting people first and championing their rights.
- Acting swiftly to remedy bad practice.
- Gathering and using knowledge and expertise, and working with others.

Survey of adult inpatients 2009

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.

This report provides the results of the seventh survey of adult inpatients in NHS trusts in England. It shows how each trust scored for each question in the survey, compared with national average results. The report should be used to understand the trust's performance, and to identify areas where it needs to improve.

There is also a set of tables on our website showing the national results for the 2009 survey compared with the results for previous years where possible, and a briefing note that highlights key issues. These documents were produced by the Acute Co-ordination Centre at Picker Institute Europe.

Similar surveys of adult inpatients were also carried out in 2002, 2004², 2005, 2006, 2007 and 2008. They are part of a wider programme of NHS patient surveys, which covers a range of topics including mental health services, outpatient services and ambulance services. To find out more about our programme, please visit our website (see further information section).

About the survey

The seventh survey of adult inpatients involved 162 acute and specialist NHS trusts. We received responses from more than 69,000 patients, a response rate of 52%. Patients were eligible for the survey if they were aged 16 years or older, had at least one overnight stay and were not admitted to maternity or psychiatric units.

¹These tables show the percentage national results

²In 2004, the Healthcare Commission carried out a separate survey of children and young people (aged 0-17). Consequently only those aged 18 and over were included in the sample for the 2004 adult inpatients survey. As a result, the benchmark reports for the 2004 survey were based on patients aged 18 and over and are therefore not directly comparable to the reports for the 2009 survey presented here.

Interpreting the report

For each question in the survey, the individual responses were converted into scores on a scale of 0 to 100. A score of 100 represents the best possible response. Therefore, the higher the score for each question, the better the trust is performing.³

Please note: the scores are **not percentages**, so a score of 80 does not mean that 80% of people who have used services in the trust have had a particular experience (e.g. ticked 'Yes' to a particular question), it means that the trust has scored 80 out of a maximum of 100. A 'scored' questionnaire showing the scores assigned to each question is available on our website (see further information' section).

Please also note that it is not appropriate to score all questions within the questionnaire for benchmarking purposes. This is because not all of the questions assess the trusts in any way, or they may be 'filter questions' designed to filter out respondents to whom following questions do not apply. An example of such a question would be Q50 "During your stay in hospital, did you have an operation or procedure?"

The graphs included in this report display the scores for this trust, compared with national benchmarks. Each bar represents the range of results for each question across all trusts that took part in the survey. In the graphs, the bar is divided into three sections:

- the red section (left hand end) shows the scores for the 20% of trusts with the lowest scores
- the green section (right hand end) shows the scores for the 20% of trusts with the highest scores
- the orange section (middle section) represents the range of scores for the remaining 60% of trusts.

A white diamond represents the score for this trust. If the diamond is in the green section of the bar, for example, it means that the trust is among the top 20% of trusts in England for that question. The line on either side of the diamond shows the amount of uncertainty surrounding the trust's score, as a result of random fluctuation.⁴

Since the score is based on a sample of inpatients in a trust rather than all inpatients, the score may not be exactly the same as if everyone had been surveyed and had responded. Therefore a confidence interval⁵ is calculated as a measure of how accurate the score is. We can be 95% certain that if everyone in the trust had been surveyed, the 'true' score would fall within this interval.

³Trusts have differing profiles of patients. For example, one trust may have more male inpatients than another. 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.

⁴If a score is on the 'threshold' for the highest scoring 20% of trusts (that is, the white diamond is on the line separating green and orange), this means that the score is one of the highest 20% of scores for that question. Similarly, trusts with scores on the threshold for the lowest scoring 20% of trusts are included in this lowest 20% of scores.

⁵A confidence interval is an upper and lower limit within which you have a stated level of confidence that the true mean (average) lies somewhere in that range. These are commonly quoted as 95% confidence intervals, which are constructed so that you can be 95% certain that the true mean lies between these limits. The width of the confidence interval gives some indication of how cautious we should be; a very wide interval may indicate that more data should be collected before making any conclusions.

When considering how a trust performs, it is very important to consider the confidence interval surrounding the score. If a trust's average score is in one colour, but either of its confidence limits are shown as falling into another colour, this means that you should be more cautious about the trust's result because, if the survey was repeated with a different random sample of patients, it is possible their average score would be in a different place and would therefore show as a different colour.

The white diamond (score) is not shown for questions answered by fewer than 30 people because the uncertainty around the result would be too great. When identifying trusts with the highest and lowest scores and thresholds, trusts with fewer than 30 respondents have not been included.

At the end of the report you will find the data used for the charts and background information about the patients that responded.

Notes on specific questions

Q6 and Q8: (Q6 "When you were referred to see a specialist, were you offered a choice of hospital for your first appointment?" and 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?") These questions exclude patients who were not referred for a planned admission to hospital by a GP or health professional in England (ie their care was not bought or 'commissioned' in England but in Northern Ireland, Scotland or Wales). This is because hospital choice and waiting time policies differ outside of England.

Q14 and Q17: The information collected by 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?") and 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?") 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 Q14 and has been reworded as "Did you ever share a sleeping area with patients of the opposite sex?"

In addition, the information based on these questions cannot be compared to similar information collected in the 2002, 2004 and 2005 surveys. This is due to a change in the questions' wording and because the results for 2009, 2008, 2007 and 2006 have excluded patients who have stayed in a critical care area, which almost always accommodates patients of both sexes. For further details, please see the 'scored' questionnaire which shows the scores assigned to each question (available on our website).⁶

Q59, Q60 and Q61: Information from Q59 ("On the day you left hospital, was your discharge delayed for any reason?") has been used to score the results for Q60 ("What was the main reason for the delay?") and Q61 ("How long was the delay to discharge?"). Further scoring information is available from the questionnaire on our website.

⁶Trusts providing services for women only have been excluded when calculating the national average for Q14 (Did you ever share a sleeping areas with patients of the opposite sex) and Q19 (Did you ever use the same bathroom or shower area as patients of the opposite sex?).

Further information

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

More information on the programme of NHS patient surveys is available on the patient survey section of the website at:

http://www.cqc.org.uk/nationalfindings/surveys.cfm

The 2009 survey of adult inpatient results, questionnaire and scoring can be found at: http://www.cgc.org.uk/PatientSurveyInpatient2009

The 2008 survey of adult inpatient results can be found at: http://www.cqc.org.uk/PatientSurveyInpatient2008

The results for the adult inpatient surveys 2004-2007 can be found on the Care Quality Commission website at:

http://www.cqc.org.uk/publications.cfm

The 2002 survey of adult inpatient results (published by the Department of Health) can be found at: http://www.dh.gov.uk/en/Publicationsandstatistics/PublishedSurvey/NationalsurveyofNHSpatients/
http://www.dh.gov.uk/en/Publicationsandstatistics/PublishedSurvey/NationalsurveyofNHSpatients/
http://www.dh.gov.uk/en/Publicationsandstatistics/PublishedSurvey/NationalsurveyofNHSpatients/

More information on 2009/10 Periodic Review is available on the Care Quality Commission's website at:

http://www.cqc.org.uk/guidanceforprofessionals/healthcare/nhsstaff/periodicreview2009/10.cfm

Admission to hospital

How much information about your condition did you get in the A&E Department?

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

How long did you wait from arriving at A&E to be admitted to a bed on a ward?

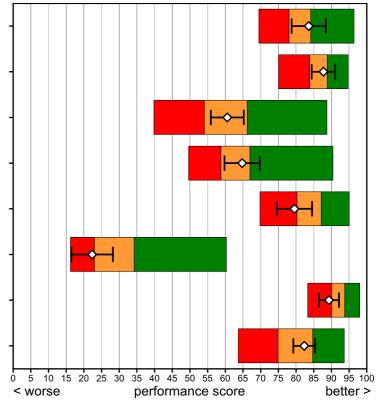
Overall, how long did you wait from being referred to hospital to be admitted?

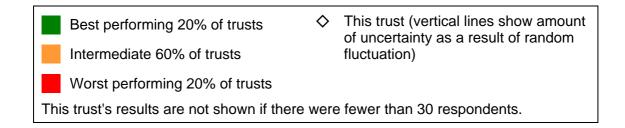
How do you feel about the length of time you were on the waiting list?

Were you given a choice of admission dates?

Was your admission date changed by the hospital?

Upon arrival, did you feel that you had to wait a long time to get to a bed on a ward?





The hospital and ward

Did you ever share a sleeping area with patients of the opposite sex?

Did you ever use the same bathroom or shower area as patients of the opposite sex?

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

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

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

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

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

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

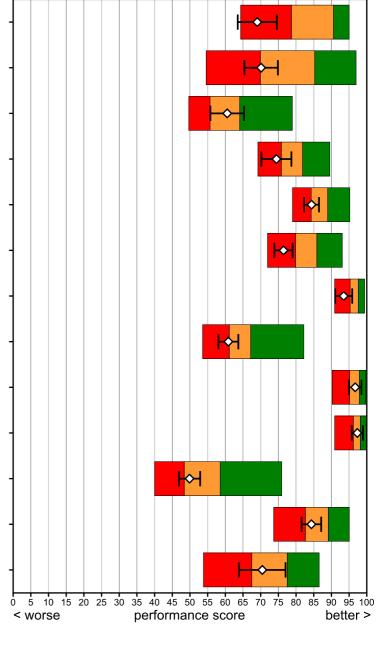
Did you see any posters or leaflets on the ward asking patients and visitors to wash their hands or to use hand-wash gels?

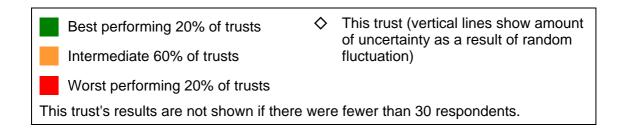
Were hand-wash gels available for patients and visitors to use?

How would you rate the hospital food?

Were you offered a choice of food?

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





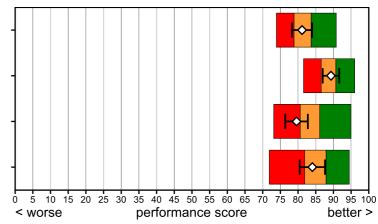
Doctors

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

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

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

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



Nurses

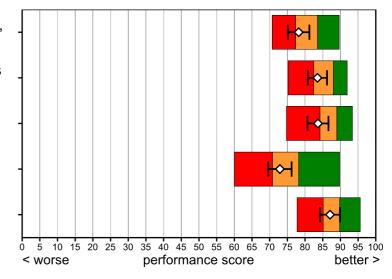
When you had important questions to ask a nurse, did you get answers that you could understand?

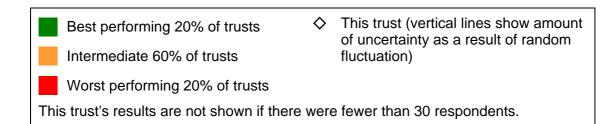
Did you have confidence and trust in the nurses treating you?

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

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

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





Your care and treatment

Did a member of staff say one thing and another say something different?

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

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

Did your family or someone close to you have enough opportunity to talk to a doctor?

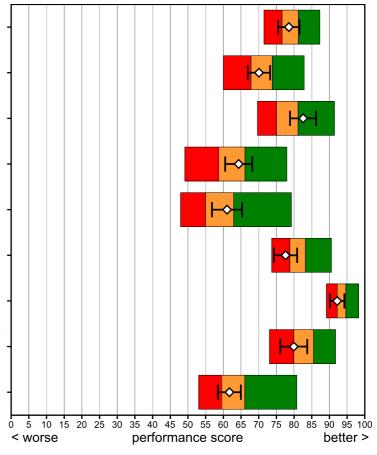
Did you find someone on the hospital staff to talk to about your worries and fears?

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

Were you given enough privacy when being examined or treated?

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

After you used the call button, how long did it usually take before you got help?



Operations & Procedures

Did a member of staff explain the risks and benefits of the operation or procedure?

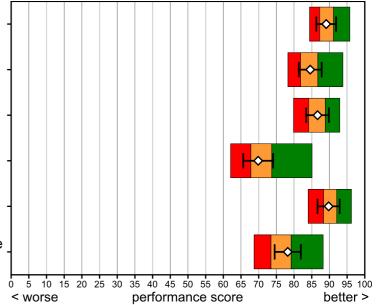
Did a member of staff explain what would be done during the operation or procedure?

Did a member of staff answer your questions about the operation or procedure?

Were you told how you could expect to feel after you had the operation or procedure?

Did the anaesthetist explain how he or she would put you to sleep or control your pain?

Afterwards, did a member of staff explain how the operation or procedure had gone?



Best performing 20% of trusts

Intermediate 60% of trusts

This trust (vertical lines show amount of uncertainty as a result of random fluctuation)

Worst performing 20% of trusts

This trust's results are not shown if there were fewer than 30 respondents.

Leaving Hospital

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

What was the main reason for the delay?

How long was the delay to discharge?

Were you given any written information about what you should do after leaving hospital?

Did hospital staff explain the purpose of the medicines you were to take home?

Did a member of staff tell you about medication side effects to watch for?

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

Were you given clear written information about your medicines?

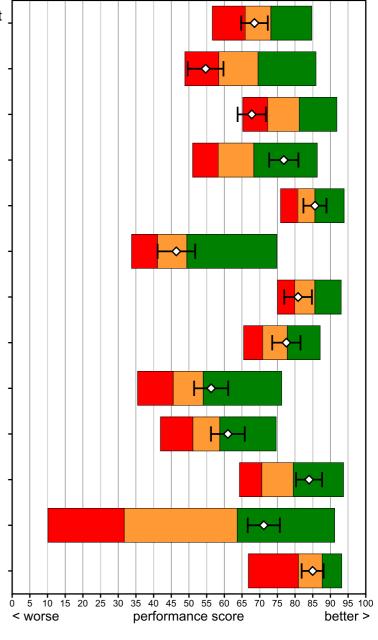
Did a member of staff tell you about any danger signals you should watch for?

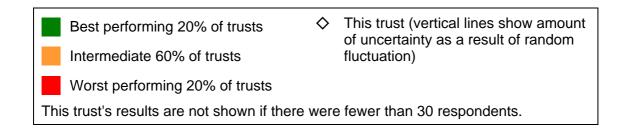
Did hospital staff give your family or someone close to you all the information they needed?

Did hospital staff tell you who to contact if you were worried about your condition?

Did you receive copies of letters sent between hospital doctors and your family doctor?

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





Overall

Did you feel you were treated with respect and dignity while you were in the hospital?

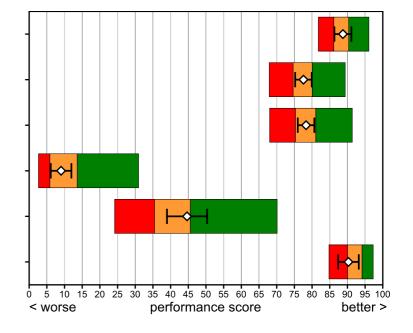
How would you rate how well the doctors and nurses worked together?

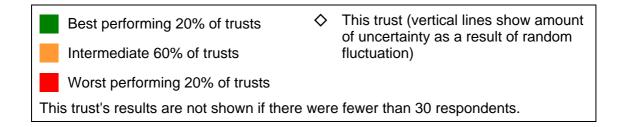
Overall, how would you rate the care you received?

While in hospital, were you ever asked to give your views on the quality of your care?

Did you see any posters or leaflets explaining how to complain about the care you received?

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





Survey of adult inpatients in the NHS 2009 University Hospital Birmingham NHS

	iversity Hospital Birmingham NHS undation Trust	Scores for this NHS trust	Interval Lower	Upper 95% Confidence	Threshold for the lowest scoring 20% of NHS Trusts	Threshold for the highest scoring 20% of NHS Trusts	Highest score achieved (all trusts)	Number of respondents (this trust)
Adı	mission to hospital							
Q3	How much information about your condition did you get in the A&E Department?	84	79	88	78	84	96	171
Q4	Were you given enough privacy when being examined or treated in the A&E Department?	88	84	91	84	89	95	183
Q5	How long did you wait from arriving at A&E to be admitted to a bed on a ward?	61	56	65	54	66	89	182
Q8	Overall, how long did you wait from being referred to hospital to be admitted?	65	60	70	59	67	90	180
Q9	How do you feel about the length of time you were on the waiting list?	80	75	85	80	87	95	199
Q10	Were you given a choice of admission dates?	22	16	28	23	34	60	194
Q11	Was your admission date changed by the hospital?	89	86	92	90	94	98	205
Q12	Upon arrival, did you feel that you had to wait a long time to get to a bed on a ward?	82	79	85	75	85	94	408

Survey of adult inpatients in the NHS 2009 **University Hospital Birmingham NHS**

University Hospital Birmingham NHS Foundation Trust	Scores for this NHS trust	Interval Lower	Upper 95% Confidence	Threshold for the lowest scoring 20% of NHS Trusts	Threshold for the highest scoring 20% of NHS Trusts	Highest score achieved (all trusts)	Number of respondents (this trust)
The hospital and ward							
Q14 Did you ever share a sleeping area with patients of the opposite sex?	69	63	75	79	91	95	275
Q19 Did you ever use the same bathroom or shower area as patients of the opposite sex?	70	65	75	70	85	97	358
Q20 Were you ever bothered by noise at night from other patients?	61	56	65	56	64	79	407
Q21 Were you ever bothered by noise at night from hospital staff?	74	70	79	76	82	90	408
Q22 In your opinion, how clean was the hospital room or ward that you were in?	84	82	86	84	89	95	408
Q23 How clean were the toilets and bathrooms that you used in hospital?	76	74	79	80	86	93	391
Q24 Did you feel threatened during your stay in hospital by other patients or visitors?	93	91	96	95	98	99	407
Q25 Did you have somewhere to keep your personal belongings whilst on the ward?	61	58	64	61	67	82	365
Q26 Did you see any posters or leaflets on the ward asking patients and visitors to wash their hands or to use hand-wash gels?	97	95	98	95	98	100	396
Q27 Were hand-wash gels available for patients and visitors to use?	97	96	99	96	98	100	396
Q28 How would you rate the hospital food?	50	47	53	48	59	76	398
Q29 Were you offered a choice of food?	84	82	87	83	89	95	408
Q30 Did you get enough help from staff to eat your meals?	70	64	77	67	77	87	145
Doctors							
Q31 When you had important questions to ask a doctor, did you get answers that you could understand?	81	78	84	79	84	91	381
Q32 Did you have confidence and trust in the doctors treating you?	89	87	92	87	91	96	409
Q33 Did doctors talk in front of you as if you weren't there?	80	76	83	81	86	95	407
Q34 As far as you know, did doctors wash or clean their hands between touching patients?	84	80	88	82	88	94	279

University Hospital Birmingham NHS Foundation Trust	Scores for this NHS trust	Interval Lower	Upper 95% Confidence	Threshold for the lowest scoring 20% of NHS Trusts	Threshold for the highest scoring 20% of NHS Trusts	Highest score achieved (all trusts)	Number of respondents (this trust)
Nurses							
Q35 When you had important questions to ask a nurse, did you get answers that you could understand?	78	75	81	77	84	90	373
Q36 Did you have confidence and trust in the nurses treating you?	83	81	86	82	88	92	411
Q37 Did nurses talk in front of you as if you weren't there?	84	81	87	84	89	93	407
Q38 In your opinion, were there enough nurses on duty to care for you in hospital?	73	70	76	71	78	90	408
Q39 As far as you know, did nurses wash or clean their hands between touching patients?	87	84	90	85	90	96	334
Your care and treatment							
Q40 Did a member of staff say one thing and another say something different?	79	75	82	77	81	87	409
Q41 Were you involved as much as you wanted to be in decisions about your care?	70	67	73	68	74	83	407
Q42 How much information about your condition or treatment was given to you?	83	79	86	75	81	91	410
Q43 Did your family or someone close to you have enough opportunity to talk to a doctor?	64	61	68	59	66	78	321
Q44 Did you find someone on the hospital staff to talk to about your worries and fears?	61	57	65	55	63	79	275
Q45 Were you given enough privacy when discussing your condition or treatment?	78	74	81	79	83	91	409
Q46 Were you given enough privacy when being examined or treated?	92	90	94	92	95	98	407
Q48 Do you think the hospital staff did everything they could to help control your pain?	80	76	84	80	86	92	271
Q49 After you used the call button, how long did it usually take before you got help?	62	59	65	60	66	81	237

Survey of adult inpatients in the NHS 2009 University Hospital Birmingham NHS Foundation Trust	Scores for this NHS trust	Interval Lower	Upper 95% Confidence	Threshold for the lowest scoring 20% of NHS Trusts	Threshold for the highest scoring 20% of NHS Trusts	Highest score achieved (all trusts)	Number of respondents (this trust)
Operations & Procedures							
Q51 Did a member of staff explain the risks and benefits of the operation or procedure?	89	86	92	87	91	96	283
Q52 Did a member of staff explain what would be done during the operation or procedure?	85	81	88	82	87	94	284
Q53 Did a member of staff answer your questions about the operation or procedure?	87	83	90	84	89	93	258
Q54 Were you told how you could expect to feel after you had the operation or procedure?	70	66	74	68	74	85	282
Q56 Did the anaesthetist explain how he or she would put you to sleep or control your pain?	90	87	93	88	92	96	240
Q57 Afterwards, did a member of staff explain how the operation or procedure had gone?	78	75	82	73	79	88	281
Leaving Hospital							
Q58 Did you feel you were involved in decisions about your discharge from hospital?	69	65	72	66	73	85	374
Q60 What was the main reason for the delay?	55	50	60	58	70	86	376
Q61 How long was the delay to discharge?	68	64	72	72	81	92	375
Q62 Were you given any written information about what you should do after leaving hospital?	77	73	81	58	68	86	401
Q63 Did hospital staff explain the purpose of the medicines you were to take home?	86	82	89	81	86	94	326
Q64 Did a member of staff tell you about medication side effects to watch for?	46	41	52	41	49	75	285
Q65 Were you told how to take your medication in a way you could understand?	81	77	85	80	86	93	296
Q66 Were you given clear written information about your medicines?	78	74	82	71	78	87	342
Q67 Did a member of staff tell you about any danger signals you should watch for?	56	51	61	46	54	76	325
Q68 Did hospital staff give your family or someone close to you all the information they needed?	61	56	66	51	59	75	306
Q69 Did hospital staff tell you who to contact if you were worried about your condition?	84	80	88	71	79	94	381
Q70 Did you receive copies of letters sent between hospital doctors and your family doctor?	71	67	76	32	64	91	381
Q71 Were the letters written in a way that you could understand?	85	82	88	81	88	93	270

University Hospital Birmingham NHS Foundation Trust	Scores for this NHS trust		Upper 95% Confidence	Threshold for the lowest scoring 20% of NHS Trusts	Threshold for the highest scoring 20% of NHS Trusts	Highest score achieved (all trusts)	Number of respondents (this trust)
Overall							
Q72 Did you feel you were treated with respect and dignity while you were in the hospital?	89	86	91	86	90	96	400
Q73 How would you rate how well the doctors and nurses worked together?	78	75	80	75	80	89	401
Q74 Overall, how would you rate the care you received?	78	76	81	75	81	91	400
Q75 While in hospital, were you ever asked to give your views on the quality of your care?	9	6	12	6	14	31	372
Q76 Did you see any posters or leaflets explaining how to complain about the care you received?	45	39	50	35	46	70	298
Q77 Did you want to complain about the care you received in hospital?	90	87	93	90	94	97	396

Background information

The sample	This trust	All trusts
Number of respondents	415	69348
Response Rate (percentage)	50	52
Demographic characteristics	This trust	All trusts
Gender (percentage)	(%)	(%)
Male	47	46
Female	53	54
Age group (percentage)	(%)	(%)
Aged 35 and younger	12	8
Aged 36-50	18	15
Aged 51-65	25	27
Aged 66 and older	45	50
Ethnic group (percentage)	(%)	(%)
White	87	92
Mixed	2	1
Asian or Asian British	8	2
Black or Black British	2	2
Chinese or other ethnic group	0	0
Not known	1	3

Care Quality Commission

RRK UNIVERSITY HOSPITAL BIRMINGHAM NHS FOUNDATION TRUST

2009 Inpatient survey publication

This document has been provided to you by the Care Quality Commission to assist you in your preparation for the publication of the 2009 inpatient survey.

Your trust should already have a copy of your trust's benchmark report, sent to the identified survey lead on 10th May. The benchmark report contains scored standardised results displayed against those from all other trusts, and identifies whether your score for each question is in the top 20%, mid 60%, or lowest 20% of all trusts' scores. These reports will be published on the CQC website on Wednesday 19th May at: http://www.cqc.org.uk/PatientSurveyInpatient2009

This document contains results for your trust that will be published on 19th May under another area of the CQC website.

Data for individual organisations on the CQC website

Patient survey results for most NHS organisations are currently displayed under the organisation search tool:

http://healthdirectory.cqc.org.uk

To access survey results for an NHS trust, enter a postcode or organisation name, select a trust, and scroll down to 'What patients said about this trust'.

Previous publication of acute trusts' survey results

An example of the presentation of survey data on the trust pages is provided below. The aim of this design is to summarise the survey data, to provide a statement as a broad overview of how well a trust is doing ('Summary scores' tab), but also to allow the more technical details to be viewed ('Charts' tab). In addition, the analysis that is applied takes into account important details such as the reliability of the data when evaluating trusts as being 'better', the 'same as', or 'worse' than other trusts. This means that a lay audience does not need to interpret the statistical details at first glance, as this interpretation has been carried out for them, though they can still choose to view the more detailed information if interested.

Example of patient survey web pages





You can view your trust's 2008 inpatient survey results on the CQC website, until these are replaced by the 2009 survey data on Wednesday 19th May.

The data contained in this document, for publication on the trust pages

The data in the following tables will be displayed on your trust page from 19th May. This information is the same as that contained in your benchmark report, just presented in a slightly different way.

The 'trust page' data includes nearly all of the survey questions¹, grouped in the same way as they are on the questionnaires that patients complete. A score has been calculated for each of these groupings, referred to here as the 'section' score (e.g. The Emergency Department, Doctors, Nurses). This is based on the average score for questions included within that section. If you click on a section heading on the webpage, you can then view the results for every question contributing to that section score.

Your Trust's results:

Number of respondents

The results from your trust are based on 415 respondents².

Please note that if your trust had **less than 30 respondents to a question then the score cannot be displayed** as the uncertainty surrounding the estimate is too great. If your trust is missing responses to a question, then **your trust will also be missing a section score for the relevant section** into which the question would fall. This is because the data is not comparable with that of other trusts, as it is comprised of fewer questions. In these instances these cells would be shown as 'no score'.

Sections

Section heading Score out of 10 How this score for your trust compares with other trusts The emergency / A&E department, answered 7.73 The same by emergency patients only Waiting lists and planned admissions. 6.4 The same answered by those referred to hospital Waiting to get to a bed on a ward 8.23 The same The same The hospital and ward 7.6 Doctors 8.35 The same Nurses 8.11 The same Care and treatment 7.42 The same Operations and procedures, answered by 8.3 The same patients who had an operation or procedure Leaving hospital 7.17 The same Overall views and experiences 6.48 The same

¹ A minority of questions are excluded from the scoring, and hence the reporting, because they do not assess trusts in any way, or they may be 'filter questions' designed to filter out respondents to whom following questions do not apply. An example of such a question would be Q50 "During your stay in hospital, did you have an operation or procedure?"

² Please note that this number may differ from that provided to you by your approved survey contractor. This is because the data used here is standardised by age, gender and method of admission. If this information was missing then those respondents had to be dropped from the analysis.