

Meeting of  
Lanarkshire NHS Board  
Date 25 August 2010

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**SUBJECT: BETTER TOGETHER INPATIENT SURVEY 2009/10:  
OVERVIEW OF PROVISIONAL RESULTS**

**1. PURPOSE**

To brief the Board on the high-level results of the Better Together inpatient survey 2009/10 and on areas for further investigation and action.

**2. CONTENT/SUMMARY OF KEY ISSUES**

**2.1 Inpatient Experience Survey**

**2.1.1 Background**

The Better Together survey questionnaire was sent to 2794 people who had had an overnight stay in either Hairmyres, Monklands, Wishaw General, Orbiston (Parksprings), Kilsyth Victoria, Kello, Lady Home or Lockhart hospitals between October 2008 and September 2009.

Patients who had been admitted to a mental health ward, maternity, were an adult with incapacity, a child or had been admitted for termination of pregnancy were excluded from the sample.

The survey commenced in January 2010 and closed at the end of April 2010. Patients were asked about their experiences in six topic areas:

- Admission to hospital
- Hospital ward and environment
- Care and treatment
- Staff, with specific questions about doctors and nurses
- Leaving hospital, including medicines
- How they felt about their experience overall

These areas had previously been identified in national surveys as being important to patients. The resulting survey tool and question set was tested in pilot Boards.

An overall response rate of 43% was achieved with 44% being male and 56% female. 52% of respondents were aged 65 and over. This is reflective of the actual profile of the in-patient population.

The provisional results were published at the end of July 2010; the final results and the national overview report are due to be published at the end of September 2010. Due to the low number of questionnaires returned for the non-acute sites, separate provisional results reports have been produced only for the three acute hospitals; data relating to the other sites have been incorporated into the NHS Lanarkshire-wide report.

### 2.1.2 Presentation of Results

The reports present the results as percentage positive i.e. the percentage of patients who agreed or strongly agreed with the question statement. The results are further displayed as:

- The top 5 results in each report
- The bottom 5 results in each report
- In the individual hospital reports, those results that were “significantly less than the Scottish average” are flagged

### 2.1.3 Top Five Results

The table below illustrates the top five results for NHS Lanarkshire and for each of the main hospitals. Those figures surrounded by a square are flagged as being significantly less than the national average.

The table shows that there is a broad consistency across all Lanarkshire hospitals in those areas where patient experience was at its most positive. Four of the top five results were in the top five on each of the main sites; only the fifth top result varied.

## Top Five Results

	Lanarkshire		Hairmyres		Monklands		Wishaw	
	Rank	% +ve	Rank	% +ve	Rank	% +ve	Rank	% +ve
I understood how and when to take my medicines.	1	95	2	94	2	95	2	96
I had privacy when being examined and treated.	2	95	1	94	3	94	1	97
Did the information you were given before attending hospital help you understand what would happen?	3	94	3	92	1	96	4	94
I understood what my medicines were for.	4	93	5	90	4	93	3	95
I was treated with care.	5	90	4	91	-	-	-	-
If your hospital visit was planned in advance, how did you feel about the length of time you waited to be admitted to hospital after being referred?	-	-	-	-	5	91	-	-
I was treated with respect.	-	-	-	-	-	-	5	92

Only one of the top five results was flagged (“I understood what my medicines were for”; 90%; Hairmyres Hospital). The NHS Lanarkshire result for this indicator was 93%; NHS Orkney and GJNH (highest Boards) 97%; NHS Forth Valley (lowest Board) 91%. In the absence of the national report, a crude national average has been calculated at 94%.

## 2.1.4 Bottom Five Results

The table below illustrates the bottom five results for NHS Lanarkshire and for each of the main hospitals (Rank 1 means the lowest positive result). Those figures surrounded by a square are flagged as being significantly below the national average.

The table shows that there is a broad consistency in those areas where patient experience was at its least positive. Three of the bottom five results were in the bottom five results on each of the main sites.

### Bottom Five Results

	Lanarkshire		Hairmyres		Monklands		Wishaw	
	Rank	% +ve	Rank	% +ve	Rank	% +ve	Rank	% +ve
I was happy with the food and drink I received.	1	52	1	42	1	47	5	68
In the ED / A&E I was told how long I would have to wait.	2	54	2	43	4	56	1	59
I know who was in charge of the ward.	3	61	3	59	3	60	2	65
I was given help arranging transport.	4	60	-	-	2	54	-	-
I was happy with how long I had to wait around when I was told I could go home.	5	68	5	64	5	69	4	70
I was told about any danger signals to watch for when I got home.	-	-	4	65	-	-	-	-
I was bothered by noise.	-	-	-	-	-	-	3	60

Five of the bottom five results were flagged:

- “I was happy with the food and drink I received”: 42% Hairmyres Hospital and 47% Monklands Hospital. This was the bottom result for both sites. The NHS Lanarkshire figure for this indicator was 52% and was the lowest figure for all boards; NHS Western Isles 89% (highest Board); NHS GG&C 60% (next lowest Board). In the absence of the national report, a crude national average has been calculated at 77%
- “I was given help with arranging transport”: 54% Monklands Hospital. The NHS Lanarkshire result for this indicator was 60%; GJNH (highest Board) 83%; NHS GG&C (lowest Board) 59%. In the absence of the national report, a crude national average has been calculated at 69%

- “I was happy with how long I had to wait around when I was told I could go home”: 64% Hairmyres Hospital. The NHS Lanarkshire result for this indicator was 68%; GJNH (highest Board) 88%; NHS Forth Valley (lowest Board) 63%. In the absence of the national report, a crude national average has been calculated at 75%
- “I was told about any danger signals to watch out for when I got home”: 65% Hairmyres Hospital. The NHS Lanarkshire result for this indicator was 70%; GJNH (highest Board) 90%; NHS Forth Valley (lowest Board) 65%. In the absence of the national report, a crude national average has been calculated at 74%

### 2.1.5 Results Significantly Below the Scottish Average

The results that were significantly less than the Scottish average were spread as follows across the sites and areas of questioning:

## Results Significantly Less Than Scottish Average

	Hairmyres	Monklands	Wishaw
Admission	3	1	0
Environment	3	4	0
Care and Treatment	1	4	0
Doctors	0	0	0
Nurses and Staff overall	2	6	0
Leaving Hospital inc medicines	5	4	0
Overall	0	1	0

These provisional results suggest that the areas that require further investigation might be prioritised as:

- Care and treatment and the patients’ experiences of interactions with nursing staff at Monklands Hospital. There is anecdotal evidence from complaints of a correlation between concerns about staff attitudes, behaviours and communication and patients’ understanding of and adherence to treatment plans

- Catering and cleanliness, with a focus on Hairmyres Hospital and Monklands Hospital
- Discharge planning, with a focus on Hairmyres Hospital and Monklands Hospital

The provisional results (it is not anticipated that the final results will be greatly different) provide a high-level snapshot of patient experience reflecting the experiences of an individual who was a patient in October 2008. They do not allow the identification of the ward in which the experience took place.

## 2.2 GP Experience Survey

### 2.2.1 Background

The Better Together GP experience survey was issued centrally in October 2009 to a random sample of patients who were registered with a GP. The question set covered issues of access and experience of contact with the practice more generally. Whilst GP access has been measured in a variety of ways since 2004, the 2009/10 survey questionnaire was developed and piloted as part of the Better Together programme. Initial results were issued by individual practice in April 2010 and the final report issued in July 2010.

### 2.2.2 Results

Results are available by individual practice and can be accessed via the Better Together website. The national report presents two indicators comparing Boards' performance:

- Overall arrangements for seeing doctors and nurses: rating good or excellent:
  - To see doctor: NHS Lanarkshire 76%; Scotland 81% (range 72% - 98%)
  - To see nurse: NHS Lanarkshire 85%; Scotland 87% (range 85% - 99%)
- Overall care provided by GP surgery:
  - NHS Lanarkshire 88%; Scotland 90% (range 88% - 98%)

The least positive experience was "people were not worried they could be overheard talking to the receptionist" where 55% rated this as a positive experience. The most positive experience was "patients know enough about how and when to take their medicines " where 99% rated this a positive experience.

A meeting is being arranged locally to look to determine what criteria/patterns of results are to be prioritised for action in conjunction with GP practices.

## 2.3 Patient Narratives

2.3.1 The Managed Clinical/Care Networks have captured a range of patient and carer narratives to inform service improvement. These take the form of written or digital stories and provide powerful insights into the lived experiences of patients and their carers.

2.3.2 As part of the Better Together programme, patient stories are informing the development of anticipatory care planning and cancer services.

## 2.4 Clinical Quality Indicator

2.4.1 In recognition of the limitations of the inpatient survey tool, a set of ward-based clinical quality indicators has been developed and tested locally. The indicators cover all aspects of the inpatient journey and seek patients' experience of whether something did or did not happen to or with them.

2.4.2 It is intended that the tool will be applied in each acute ward (with the help of volunteers) in a planned way and that results will be stored in and accessible from the clinical information portal which is under development.

The work that has been underway to develop and test local clinical quality indicators, which are due to be rolled out from October 2010, will provide more local, real-time patient feedback that can be used to make improvements to service delivery in a more targeted way.

## 4. CONCLUSIONS

The Board is asked to:

- Note the high-level results of the Better Together inpatient survey 2009/10
- Note that work will be undertaken to address the findings of both the inpatient and GP access survey, the former linked in particular to the programme of activities both underway and in development to improve the quality of care experienced by patients

## 5. FURTHER INFORMATION

For further information or clarification of any issues in this paper please contact; Paul Wilson, Executive Director of NMAHPs on 01698 206401 or Shona Welton, Head of Patient Affairs on 01698 245002.

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Paul Wilson, Executive Director of NMAHPs  
24 August 2010