

COMPLAINTS AND FEEDBACK REPORT

April to June 2017

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Summary

The summary section provides an overview of key areas of performance ('risks' and 'highlights') and identifies any actions being taken as a result.

	Risks
Complaints	<ul style="list-style-type: none"> The number of informal concerns received this quarter increased from 414 between January and March 2017 to 468 between April and June 2017. Compared to last quarter, 5 questions in the complainant satisfaction survey have seen the number of complainants who have selected the best possible response to each question decrease between April and June 2017. <p>ACTION:</p> <ul style="list-style-type: none"> Results from the complainant satisfaction survey fluctuate each quarter. These results are shared with each care group and are monitored to ensure that is no significant change in performance. A new complaints manager has recently been appointed. A review of the complainant satisfaction survey and audit process will be undertaken once the new complaints manager is in post.
Friends and Family Test (FFT)	<ul style="list-style-type: none"> The FFT response rate for community between April and June 2017 is 14%, below the 17% target. For April to June 2017, the community FFT score (90%) is 5% lower than the 12 month national average. <p>ACTION</p> <ul style="list-style-type: none"> A deep dive has been undertaken into patient experience data for Community and will be reported in the September 2017 Integrated Performance Report. This deep dive involved reviewing all patient experience data for Community, including FFT, complaints, comment cards, website feedback and surveys, to identify common trends and areas in need of improvement. A summary of this paper will be featured in a future quarterly Complaints and Feedback Report.

Highlights
<ul style="list-style-type: none"> There has been a decrease in the number of formal complaints with 324 received this quarter, compared with 381 between January and March 2017. By combining the number of formal complaints and informal concerns received, a total of 792 were raised between April and June 2017, a slight decrease from 795 received last quarter. At the end of the first quarter for 2017/18, the year to date performance of responding to complaints within the agreed timescale is 90%, above the 85% target. At the end of June 2017, just 1% (1) of all open complaints remain overdue, a decrease from 10% (16) at the end of March 2017. Following a review by the Parliamentary Health Service Ombudsman (PHSO) this quarter, the Trust was informed that there was one new decision received, and this was not upheld.
<ul style="list-style-type: none"> For April to June 2017: <ul style="list-style-type: none"> Inpatient areas achieved a response rate of 32%, achieving the 30% target A&E areas achieved a response rate of 23%, above the 20% target Maternity achieved a response rate of 30%, above the 20% target Outpatients achieved a response rate of 10%, achieving the 9% target For April to June 2017, Inpatient (96%), A&E (89%), maternity (96%) and outpatient (94%) scores are all equal to, or higher than the 12 month national average

Summary

	Risks
Local patient satisfaction survey	<ul style="list-style-type: none"> Results in the inpatient local satisfaction survey has shown performance to have either remained the same or deteriorated between April and June 2017 compared with last quarter. The outpatient local satisfaction survey has shown a deterioration on 5 out of 10 questions. <p>Themed questions</p> <ul style="list-style-type: none"> The themed question relating to being disturbed by noise at night fell by 2% (from 50% not being disturbed by noise at night in 2016 to 48% in 2017). The themed question relating to receiving the help needed to drink fell by 2% compared to the same period last year. <p><u>ACTION</u></p> <ul style="list-style-type: none"> Performance from all local patient satisfaction surveys will continue to be monitored and appropriate action taken should ongoing deterioration or low performance be evident. Results are shared with each individual ward and department so local actions can be taken
National Surveys	<ul style="list-style-type: none"> In the 2016 National Inpatient Survey, the Trust did not score significantly better on any questions, but significantly worse on 1 question compared to the 2015 survey. Regarding the question where the Trust scored significantly worse on in 2016 (Planned admission: admission date changed by hospital), although the score for this question is significantly worse in 2016 compared to 2015, it has returned to the same score achieved in most other previous surveys. Overall, this Trust saw an improvement on 24 out of 65 questions in 2016 compared with 2015, the same score was achieved on 11 questions, and scores deteriorated on 30 questions. However, the Trust performance is in line with national scores. <p><u>ACTION:</u> Results from all national surveys are considered alongside other patient experience data in order to agree an action plan to ensure improvements are made.</p>

Highlights
<ul style="list-style-type: none"> The community satisfaction survey has shown performance to have improved in 11 questions during April to June 2017, compared to last quarter. As we have been running the local satisfaction surveys since April 2016, we are now able to compare data with the same period last year, in addition, the themed questions have been repeated so we are able to identify any changes in performance. <p>Themed questions</p> <ul style="list-style-type: none"> All four themed questions relating to 'staff' either improved or remained the same compared to the same period last year Two of the three themed questions relating to 'nutrition' either improved or remained the same compared to the same period last year.
<ul style="list-style-type: none"> In the 2016 National Inpatient Survey, compared to other trusts, this Trust scored 'about the same' on all questions. This is a slight improvement on 2015, where the Trust scored 'about the same' as other trusts on all questions except one.

Feedback overview

This page presents an overview of the top 10 most commonly raised negative themes across all feedback sources. Only data from negative feedback are presented as some sources provide only negative feedback (complaints and concerns). In addition, the focus on negative feedback supports the identification of areas for improvement.

The table below presents the ranking each negative theme received through that feedback source. For example, 1 indicates that this was the most raised theme from that feedback source, 2 indicates it is the second most raised theme, and so on. The number in the bracket represents the ranking for that theme last quarter.

The colour coding applied to the table below is as follows:

Ranked 1-3 **RED** (most raised) Ranked 4 to 7 **AMBER** Ranked 8 to 10 **YELLOW**

Top 10 themes	Current quarter: April to June 2017				
	Formal complaints (385)	Informal concerns (451)	Friends & Family Test* (2812)	Local Patient Satisfaction Surveys* (73)	Website and comment cards (177)
Waiting times	5 (5)	2 (2)	1 (1)	4 (5)	2 (1)
Communication	2 (2)	1 (1)	4 (3)	1 (2)	3 (2)
Staff attitude	4 (4)	4 (4)	2 (2)	2 (6)	1 (3)
Clinical care and treatment	1 (1)	3 (3)	3 (4)	7 (1)	4 (5)
Nursing care	3 (3)	7 (5)	5 (5)	5 (4)	5 (6)
Environment	8 (9)	6 (6)	6 (6)	3 (3)	6 (4)
Cancellations	7 (7)	5 (7)	7 (7)	6 (8)	8 (9)
Discharge	6 (8)	8 (8)	8 (8)	8 (7)	9 (10)
Resources	9 (6)	9 (9)	10 (10)	- (10)	10 (7)
Food and nutrition	10 (10)	10 (10)	9 (9)	- (9)	7 (8)

The table above highlights that 'clinical care and treatment' is the most raised theme from formal complaints, whereas 'Communication' is the most raised theme from informal concerns and local patient satisfaction surveys. 'Waiting times' is the most raised negative theme from the Friends and Family Test and 'Staff attitude' is the most raised negative theme from website feedback and comment cards. Each piece of feedback is received during different parts of the patient journey, this may explain why different issues are being raised from each feedback source.

* data taken from free-text comments

This section of the report aims to provide a comprehensive review of complaints activity over the past quarter. An analysis against other comparable periods is presented to indicate any trends or variation in activity.

If a complainant is unhappy with the response received from the Trust, they have the right to contact the Parliamentary and Health Service Ombudsman (PHSO) to request an investigation. All PHSO requests and decisions are outlined in this section of the report.

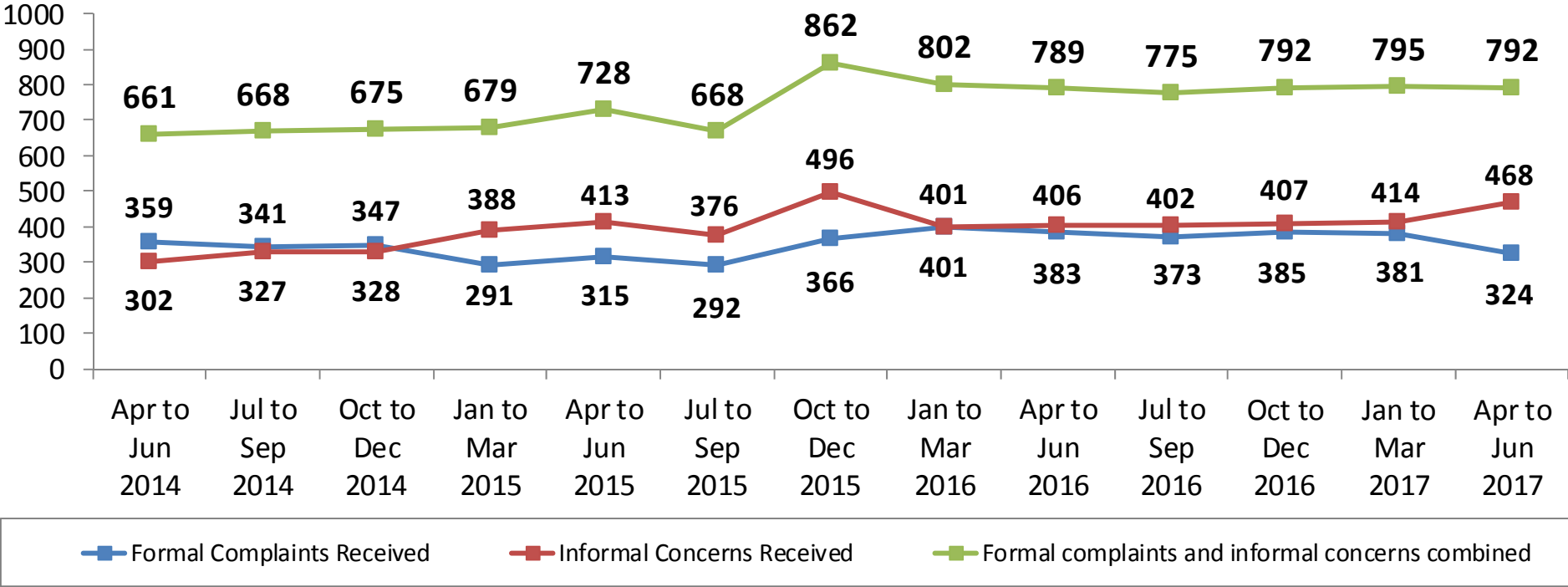
The Trust carries out a complainant satisfaction survey, which asks for feedback from complainants on how the Trust managed their concerns. Results of the survey are featured in each report along with any related actions.

Across the Trust we take all complaints very seriously and wherever possible we use them to learn from and to make changes and improvements to our services. Example of actions that have been implemented over the past quarter are highlighted.

Where they are available, benchmarking data are provided to understand how the Trust performs against other similar sized NHS trusts to provide greater assurance regarding performance against key indicators.

Complaints – Number of formal complaints and informal concerns received

Total number of concerns received by quarter



During this quarter 324 new formal complaints were received, a decrease from 381 received last quarter. 468 informal concerns were received this quarter, compared with 414 last quarter. By combining the number of formal complaints received and the number of informal concerns, a total of 792 were raised between April and June 2017, a slight decrease from 795 received last quarter.

The graph above shows that when complaints data are presented as a quarterly breakdown rather than monthly, an increase in the number of combined complaints and concerns received took place in the quarter October to December 2015 compared to previous quarters and whilst this has been stable for 6 quarters it has not returned to the numbers of combined complaints and concerns previously seen.

As highlighted in a previous report, a deep dive was undertaken to identify whether any individual department or theme has seen a disproportionate increase in the number of formal complaints received, and this was presented to the Patient Experience Committee in January 2017. The 6 directorates which were identified as having a significant increase in the number of formal complaints received during the 2016 calendar year have carried out a further review of the complaints received.

Each of these 6 directorates have produced an action plan to address the issues identified and will report back to the Patient Experience Committee in September and October 2017 to demonstrate any change in the number of complaints received, or an improvement in the issues identified.

Following this, the outcome will be featured in a future report.

Complaints – Formal complaints received by patient activity

Percentage of patients who have made a formal complaint

	Jul to Sep 2016	Oct to Dec 2016	Jan to Mar 2017	Apr to Jun 2017
Combined Community & Acute Care	0.10%	0.10%	0.10%	0.09%
Emergency Care*	0.20%			
Acute and Emergency Medicine		0.22%	0.17%	0.17%
Medicine and Pharmacy Services		0.15%	0.20%	0.19%
Head & Neck Services	0.08%	0.09%	0.08%	0.10%
Labs, Engineering, Gynaecology, Imaging, Obstetrics, Neonatology	0.09%	0.13%	0.11%	0.10%
Musculoskeletal	0.11%	0.13%	0.13%	0.12%
Operating Services, Critical Care & Anaesthesia	0.21%	0.16%	0.14%	0.13%
South Yorkshire Regional Services	0.10%	0.10%	0.12%	0.10%
Specialised Cancer, Medicine & Rehabilitation	0.03%	0.04%	0.04%	0.03%
Surgical Services	0.17%	0.14%	0.11%	0.13%
Trust total	0.10%	0.11%	0.10%	0.09%

* From 1 September the Emergency Care Group split into two care groups. A&E along with Acute Medicine became the **Acute & Emergency Medicine Care Group**. Diabetes and Endocrinology, Gastroenterology, Respiratory and Pharmacy have formed a separate care group – **Medical and Pharmacy Services**

Improvement on last quarter Deterioration on last quarter No change on last quarter

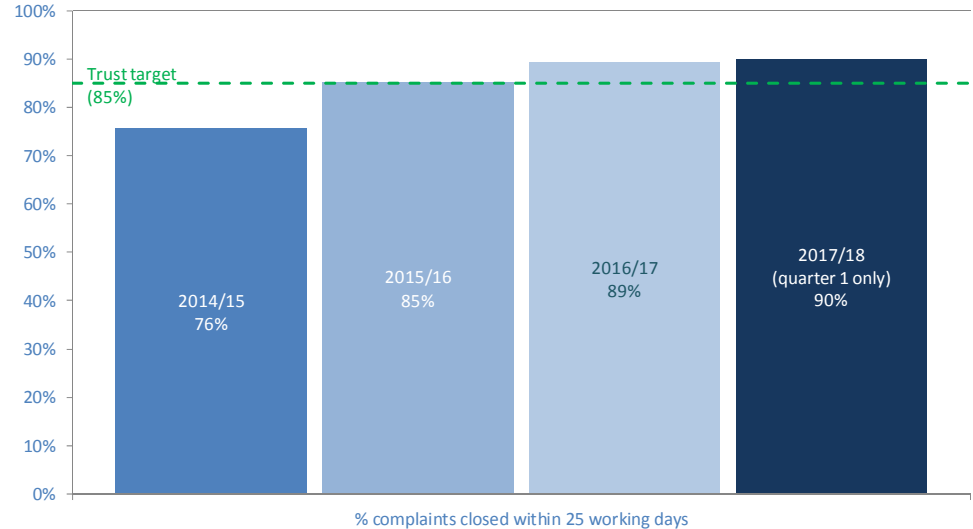
The table above shows the percentage of patients that have made a formal complaint, for each care group. These data show that over the past quarter (April to June 2017), the Trust received a complaint for every 0.09% of patients treated. This is in line with previous quarters.

Compared to last quarter, no individual care group has seen a significant increase or deterioration in the proportion of formal complaints received this quarter. These data will continue to be monitored to ensure the number of complaints received for each care group is in line with activity.

Complaints – Response times

The Trust works to a locally set target of responding to at least 85% of formal complaints on time (or with an extension agreed with the complainant). The chart below shows response time performance compared to previous years.

Percentage of formal complaints closed on time



Breakdown of ‘on time’ complaints

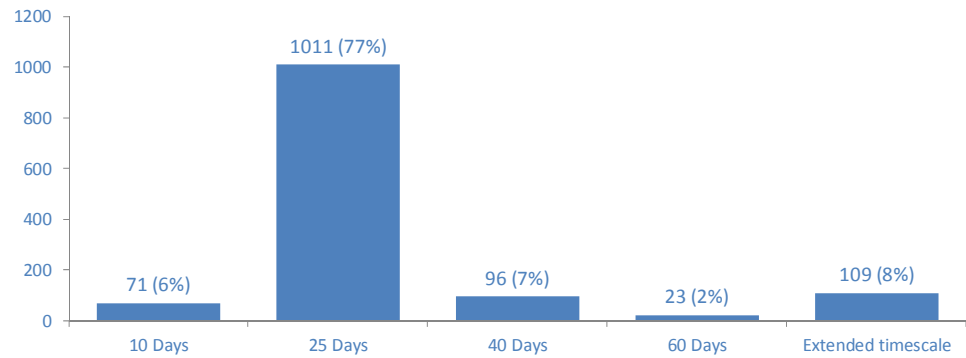
The Trust works to a tiered response times process. Complaints are graded by risk based on the complexity of the concerns raised. Each risk level determines the length of time allocated for responding to the complaint; which is then agreed with the complainant from the outset.

The following tiered response times have been set by the Trust:

- Level 1 - 10 day target for complaints which can be resolved more quickly
- Level 2 - 25 day target for complaints of medium complexity
- Level 3 - 40 day target for more complex complaints
- Level 4 - 60 day target for very complex complaints, or when an external investigation is required, such as an inquest

Of the 1310 formal complaints that have been closed ‘on time’ over the past 12 months (July 2016 to June 2017), the chart below presents the breakdown by the response timescales agreed through the tiered response times process:

Allocation of tiered response timescales

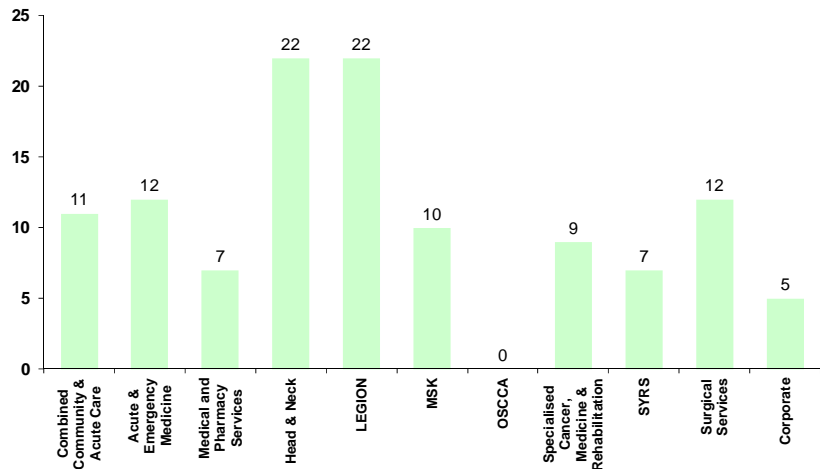


The chart above shows that over the past 12 months 8% of closed complaints have had their timescales extended. This is a reduction from the 11% reported last quarter for the 12 month period of April 2016 to March 2017. When comparing the same two periods, the number of complaints allocated to 40 days has increased from 4% to 7%, and those allocated to 60 days have increased from 1% to 2%. This is an indication that the appropriate response time target is being allocated from the outset.

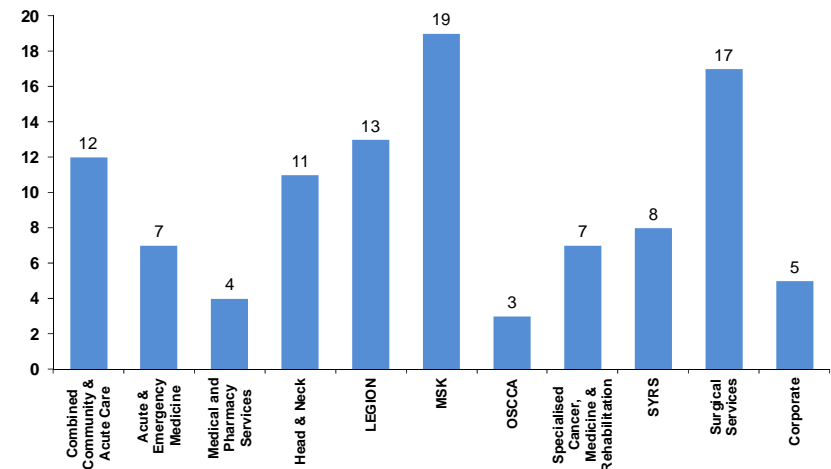
The reasons for extending a complaint can include; arranging a meeting with the complainant which is outside of the agreed response time, or if more information is provided or discovered that was not available from the outset which makes the complaint investigation more complex. It is understood that there will always be a proportion of complaints that will require an agreed extension, due to these reasons.

Complaints – Status of closed and open complaints

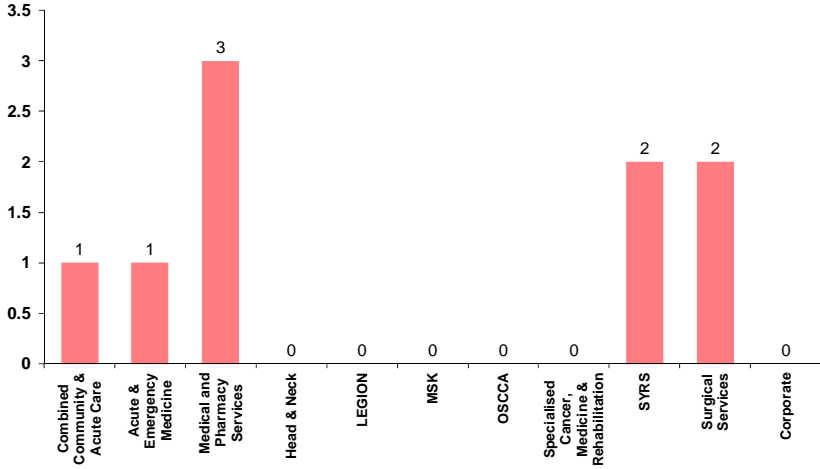
Number of formal complaints closed and in time (or extended) (in Jun 2017)



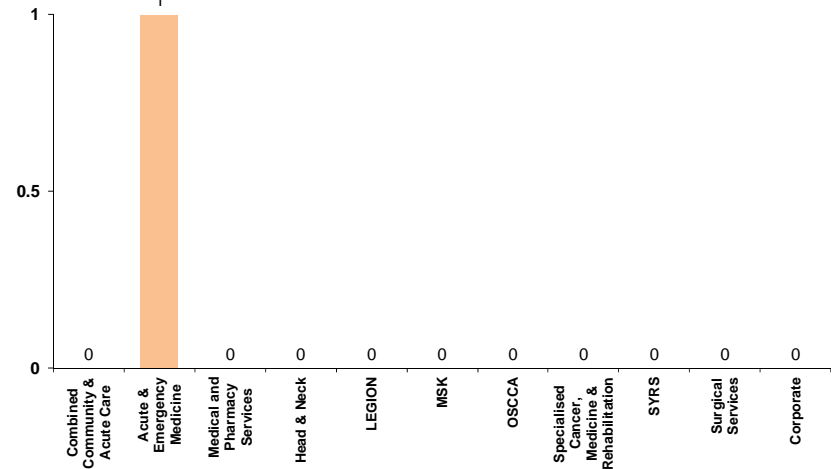
Number of formal complaints open and in time (or extended) (at end of Jun 2017)



Number of formal complaints closed and overdue (in Jun 2017)



Number of formal complaints open and overdue (at end of Jun 2017)



The series of graphs above and to the left show the number of complaints that have been responded to ‘in time’ or with an agreed extension and those that have been closed beyond the agreed response time (overdue). The graphs above and to the right show the current status of all ‘open’ complaints, which is a helpful predictor of complaint response time performance in the upcoming months and is useful as an early warning of potential problems which are

developing. The data above are based on figures at the end of June 2017, as the number of overdue complaints changes daily as does the number of complaints closed.

At the end of June 2017, 1% (1) of all open complaints remain overdue, a decrease from 10% (16) at the end of March 2017.

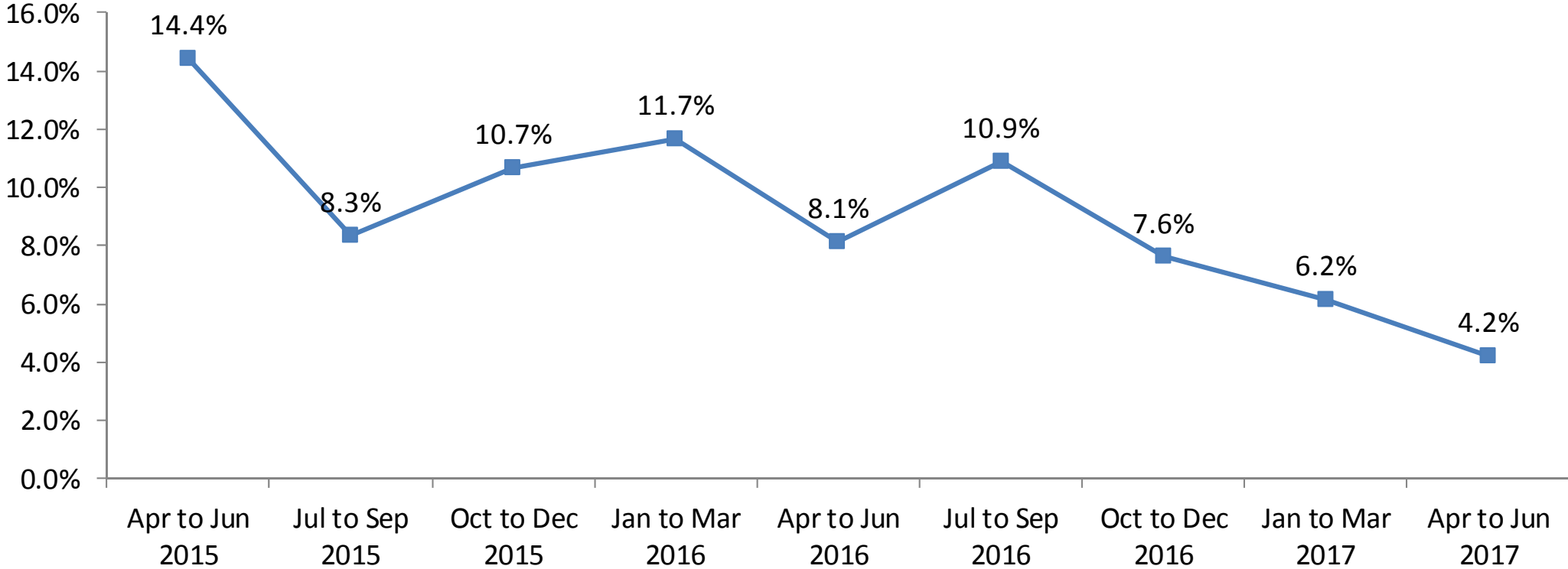
Complaints – Re-opened complaints

The proportion of complaints which are re-opened is a useful indicator of how satisfied complainants are with the response they received from the Trust to the concerns that they raised. It should be noted, that whilst response times are one quality indicator in complaints management, another important aspect is the quality of the response.

It should be noted that the January to March 2017 and particularly April to June 2017 figures are likely to increase as complaints closed in these quarters may be reopened in subsequent months.

The graph below shows the percentage of complaints closed each month that were subsequently re-opened, and shows a spike in the percentage of re-opened complaints in the quarter April to June 2015, followed by a return to a level of re-opened complaints at about 8-11%.

Percentage of complaints closed that were subsequently re-opened (to date)



Complaints - Subjects raised in formal complaints and informal concerns

Top 10 subjects raised in formal complaints and informal concerns over the past quarter compared to the last 12 months

Current quarter (April to June 2017)

Last 12 months (July 2016 to June 2017)

#	Subject	Qty	% of all subjects raised
1	Communication with patient	201	24%
2	Communication with relative / carer	58	7%
3	Attitude	50	6%
4	Appropriateness of medical treatment	40	5%
5	Access to information	26	3%
6	Delay in treatment	23	3%
7	Cancellation of appointment	20	2%
8	Unhappy with outcome of surgery	19	2%
9	General nursing care	18	2%
-	Waiting time for follow-up appointment	18	2%

#	Subject	Qty	% of all subjects raised
1	Communication with patient	655	19%
2	Communication with relative / carer	215	6%
3	Attitude	211	6%
4	Appropriateness of medical treatment	173	5%
5	General nursing care	139	4%
6	Delay in treatment	101	3%
7	Waiting time for follow-up appointment	95	3%
8	Access to information	77	2%
9	Cancellation of appointment	70	2%
10	Unhappy with outcome of surgery	64	2%

Of the 201 subjects coded against 'communication with patient' between April and June 2017, 158 (79%) have been raised through informal concerns. This reflects the nature of informal concerns where the Patient Services Team can support patients and relatives in communicating with the relevant member of staff to resolve any concerns before they escalate into a formal complaint.

Complaints - Subjects raised in formal complaints

Top 10 subjects raised in formal complaints by Care Group

	Communication with patient	Appropriateness of medical treatment	Attitude	Unhappy with outcome of surgery	General nursing care	Choice of medical treatment	Inappropriately discharged	Delay in treatment	Cancellation of appointment	Competence of medical staff
Acute and Emergency Medicine	1	7	4	0	3	1	1	0	0	1
Combined Community & Acute Care	1	1	3	0	5	0	1	1	0	1
Head & Neck Services	14	12	11	6	1	1	0	2	1	2
Labs, Engineering, Gynaecology, Imaging, Obstetrics, Neonatology	7	1	3	1	0	2	0	2	0	0
Medicine and Pharmacy Services	2	0	2	0	2	2	1	2	1	2
Musculoskeletal	0	6	1	3	4	2	1	1	0	1
Operating Services, Critical Care & Anaesthesia	0	0	0	0	0	0	1	0	0	0
South Yorkshire Regional Services	4	0	4	2	0	0	0	1	3	1
Specialised Cancer, Medicine & Rehabilitation	3	5	2	0	0	1	1	2	2	0
Surgical Services	7	7	1	6	1	7	5	0	2	1
Trust Wide Departments	4	0	1	0	0	0	1	0	0	0
TOTAL	43	39	32	18	16	16	12	11	9	9

The table above shows the top 10 subjects raised in formal complaints over the past quarter by individual care group. The cells which have been highlighted indicate the subject that has been raised most frequently for each care group.

The two most frequently raised subjects in formal complaints between April and June 2017 are 'communication with patient' (43) and 'appropriateness of medical treatment' (39).

'Communication with patient' is the most frequently raised subject for 5 care groups, and raised on 2 occasions, along with five other subjects, for Medicine and Pharmacy Services. 'Communication with patient' is also the subject that has been raised more than any other subject for a single care group, being raised 14 times in Head & Neck services.

In relation to the complaints relating to 'communication with patient' in Head and Neck, the largest number of concerns received are around appointment letters with Ophthalmology receiving 4, then ENT and Oral and Dental both receiving 1 each. Other concerns raised were as follows:

- Three Neurosciences complaints were received regarding the length of the wait for test results to be reported.
- Two complainants in Ophthalmology and two in Neurosciences were not happy about how clinical information was given.
- One general communication complaint was raised within ENT about access to information for the hard of hearing.

Complaints – Parliamentary and Health Service Ombudsman (PHSO) cases

If a complainant is unhappy with the response received from the Trust, they have the right to contact the Parliamentary and Health Service Ombudsman (PHSO) to request an investigation into their complaint.

The PHSO is the final line in the NHS complaint process and offers an independent view on whether the NHS has reasonably responded to a complaint. The PHSO has increased the number of investigations it undertakes and consequently the Trust has seen an increase in the number of complaints investigated by the PHSO.

The number of PHSO cases, decisions and outcome by quarter

	Apr to Jun 14	Jul to Sep 14	Oct to Dec 14	Jan to Mar 15	2014/15	Apr to Jun 15	Jul to Sep 15	Oct to Dec 15	Jan to Mar 16	2015/16	Apr to Jun 16	Jul to Sep 16	Oct to Dec 16	Jan to Mar 17	2016/17	Apr to Jun 17	2017/18
Number of new PHSO cases	3	7	11	8	29	6	3	7	4	20	4	5	6	7	22	5	5
Number of PHSO decisions	4	10	3	6	23	9	9	8	5	31	8	6	6	2	22	1	1
Number of PHSO cases fully or partly upheld	2	1	0	0	3	3	1	1	2	7	3	2	2	1	8	0	0

New PHSO cases this quarter

This quarter, 5 new information requests have been received, these relate to the following directorates:

- **Combined Community and Acute Care**
 - Integrated Geriatric and Stroke Medicine (3)
- **Labs, Engineering, Gynaecology, Obstetrics, Neonatology**
 - Gynaecology (1)
- **Head and Neck**
 - Oral & Dental (1)

New PHSO decisions this quarter

There was one new decision received from the PHSO during this quarter, this complaint was not upheld.

Complaints - Actions taken as a result of a formal complaint

Agreeing and undertaking actions as a result of formal complaint investigations, where mistakes have been made, or where services have not been delivered to the standard we would expect, is the most important factor in learning from complaints.

Below is an example of how the Trust has responded to a complaint raised to ensure patient needs are being met:

Directorate	Background	Actions agreed
<p>Specialised Cancer Services</p>	<p>A complaint was received regarding the incorrect dosage of medication being prescribed by the Weston Park Hospital pharmacy. This was identified by a district nurse which meant the patient had to visit Weston Park Hospital to collect the amended prescription.</p> <p>When the patient arrived the Weston Park Hospital Pharmacy was closed and they were advised to collect the prescription from Boots. The patient then visited the Boots Chemist at Heeley Road and incurred a £96 private prescription charge due to the prescription being issued by the hospital.</p> <p>The complainant asked for the patient to be reimbursed for the private prescription charge but also for learning to take place in advising patients of the potential charge if they use a local pharmacy.</p>	<p>Following investigation it was confirmed that the original prescription dispensed was incorrect and that this was a dispensing error. This was reported on the Trust’s incident system as soon as it was brought to the pharmacy manager’s attention and has been fully investigated.</p> <p>It was also confirmed that when the patient was advised by Weston Park staff to collect their prescription from Boots, it was intended that the patient would visit the Boots pharmacy located within the Royal Hallamshire Hospital which would have still been open at this time of day, but this may not have been clearly explained to the patient. There would not have been a private prescription charge if the prescription was collected from the Royal Hallamshire pharmacy.</p> <p>As a result of this complaint, a card has been developed by the pharmacy practice development team which has details and directions to the Boots located in the Royal Hallamshire Hospital which will be given to anyone needing to make out of hours collections.</p> <p>Sincere apologies have been offered to both the complainant and the patient, and it has been agreed that the private prescription charge will be reimbursed by the Trust.</p>

Complaints – Complainant satisfaction survey

The complainant satisfaction survey consists of 15 multiple choice questions, with the opportunity to add a free text response at the end of the survey.

All complainants are sent the survey 3 weeks after they receive the final response to their complaint, unless they choose to opt out. Details of how to opt out are included on a postcard which is sent along with the final response.

Between 1st April and the 30th June 2017, 57 complainants responded to the survey, giving a response rate of 24%. This is lower than the response rate of 30% (60 complainants) achieved last quarter.

Key results

Top 2 most positive results

- 84% (42) of complainants who responded stated that they 'Definitely agree'(58%) or 'Partially agree'(26%) that the response to their complaint was easy to understand, compared with 74% last quarter.
- 80% (40) of complainants who responded stated that they 'Definitely agree'(66%) or 'Partially agree'(14%) that they were told what they could do if they were unhappy with the response to their complaint, compared with 68% last quarter.

Bottom 2 most negative results

- 23% (11) of complainants who responded stated that they 'Definitely agree'(13%) or 'Partially agree'(11%) that they were confident improvements have been made as a result of their complaint, compared with 36% last quarter.
- 39% (19) of complainants who responded stated that they 'Definitely agree'(27%) or 'Partially agree'(12%) that they were told about help available to make a complaint (such as independent advocacy), compared with 45% last quarter.

Compared to last quarter, 5 questions have seen their score decrease this quarter and 10 have seen an improvement. A breakdown of all positive responses by quarter are presented on the following page.

As reported previously, the complainant survey is more complex than other patient satisfaction surveys as, for example, if a complaint is 'not upheld', this may influence the overall experience of the process. Therefore it is acknowledged that overall scores are likely to be lower than we would expect from other surveys.

Complainant satisfaction interviews and audits

In order to follow up in more detail on results from the complainant satisfaction survey, previously a sample of complainants who chose to provide their contact details in the survey were selected for follow-up interviews, either by telephone or face to face. In addition, the complaint files for these complaints were also audited with the outcome of the survey, interviews and audits then being compared.

A new complaints manager has recently been appointed. A review of the complainant satisfaction survey and audit process will be undertaken once the new complaints manager is in post.

Complaints – Complainant satisfaction survey

Complainant satisfaction survey results

The table below presents the percentage of patients who gave a positive response to each question ('definitely agree' and 'partially agree'). Results are presented as either 'better' or 'worse' than the previous quarter using the following system:

- Green arrow indicates a 'better' score compared to the previous quarter
- Red arrow indicates a 'worse' score compared to the previous quarter

Question	Apr to Jun 2016	Jul to Sep 2016	Oct to Dec 2016	Jan to Mar 2017	Apr to Jun 2017	Past 12 months (Jul 16 to Jun 17)
Information on how to make a complaint was easy to find	68%	64% ↓	75% ↑	75%	50% ↓	66%
It was easy to make a complaint	79%	73% ↓	86% ↑	83% ↓	64% ↓	76%
I was told about help available to make a complaint, such as independent advocacy	50%	38% ↓	60% ↑	45% ↓	39% ↓	44%
I was given a choice as to how my complaint would be responded to	69%	52% ↓	73% ↑	56% ↓	64% ↑	59%
I was told how long it would take to answer my complaint	73%	66% ↓	86% ↑	75% ↓	67% ↓	72%
I was kept informed of any delays in responding to my complaint	52%	40% ↓	68% ↑	56% ↓	59% ↑	53%
The response was easy to understand	71%	64% ↓	72% ↑	74% ↑	84% ↑	72%
My concerns were addressed in an open and honest way	64%	47% ↓	60% ↑	55% ↓	63% ↑	55%
I was told what action had been taken as a result of my concerns	61%	52% ↓	67% ↑	55% ↓	76% ↑	60%
I feel my complaint was taken seriously	61%	53% ↓	70% ↑	58% ↓	61% ↑	59%
I was told what I could do if I was unhappy with my response	72%	70% ↓	83% ↑	68% ↓	80% ↑	74%
I am satisfied with how the complaint was handled	62%	40% ↓	50% ↑	40% ↓	52% ↑	44%
My complaint was dealt with quickly enough	65%	47% ↓	63% ↑	53% ↓	63% ↑	55%
I am confident that improvements have been made as a result of my complaint	25%	20% ↓	24% ↑	36% ↑	23% ↓	25%
I consider my complaint to be resolved	46%	28% ↓	46% ↑	42% ↓	48% ↑	39%

A number of complainants chose to leave comments in the complaints survey. A selection of these comments is presented below:

After the initial contact, all responses were very good.

I was reluctant to make the complaint but did so because I could see that there was an issue of processing data/info that needed to be changed. I am very pleased that changes have been made as a result.

A number of comments on my response letter were incorrect and it was also not guaranteed that I would see a different consultant on my next appointment.

An overview of all positive responses by individual care group are presented on the following page.

Complaints – Complainant satisfaction survey

The table below presents the percentage of patients who gave a positive response (Definitely agree, Partially agree) to each question over the past 12 months (July 2016 to June 2017) in the complainant satisfaction survey by individual care group.

Green cells indicate where care groups score higher than (or equal to) the overall Trust total for that question. Red cells indicate those care groups that scored lower than the Trust total.

Percentage of positive responses per question by Care Group (July 2016 to June 2017)

	Acute and Emergency Medicine (From Sep 16)	Combined Community and Acute Care	Head and Neck Services	LEGION	Medical and Pharmacy Services (From Sep 16)	Musculoskeletal	OSCCA	South Yorkshire Regional Services	Specialist Cancer, Medicine and Rehabilitation	Surgical Services	Trust Wide Departments	Trust total
Total number of responses	28	17	27	22	21	31	7	14	12	16	7	202
Information on how to make a complaint was easy to find	65%	43%	68%	59%	73%	62%	100%	71%	67%	93%	43%	66%
It was easy to make a complaint	65%	60%	77%	73%	80%	78%	80%	93%	67%	93%	100%	76%
I was told about help available to make a complaint, such as independent advocacy	35%	42%	39%	35%	43%	32%	75%	92%	42%	71%	20%	44%
I was given a choice as to how my complaint would be responded to	37%	60%	39%	70%	73%	58%	75%	77%	75%	93%	20%	59%
I was told how long it would take to answer my complaint	80%	67%	68%	73%	94%	63%	67%	79%	64%	87%	60%	72%
I was kept informed of any delays in responding to my complaint	63%	55%	41%	75%	70%	43%	40%	62%	60%	75%	0%	53%
The response was easy to understand	89%	73%	58%	81%	100%	58%	57%	69%	70%	93%	57%	72%
My concerns were addressed in an open and honest way	58%	60%	44%	62%	73%	41%	29%	54%	70%	80%	86%	55%
I was told what action had been taken as a result of my concerns	56%	62%	44%	76%	86%	67%	29%	69%	60%	87%	43%	60%
I feel my complaint was taken seriously	55%	80%	48%	62%	67%	46%	33%	69%	70%	80%	71%	59%
I was told what I could do if I was unhappy with my response	53%	73%	72%	84%	93%	76%	71%	92%	80%	80%	83%	74%
I am satisfied with how the complaint was handled	35%	64%	25%	50%	67%	28%	29%	38%	60%	67%	83%	44%
My complaint was dealt with quickly enough	40%	67%	60%	65%	73%	52%	57%	46%	50%	67%	100%	55%
I am confident that improvements have been made as a result of my complaint	22%	28%	20%	40%	40%	17%	0%	30%	20%	43%	17%	25%
I consider my complaint to be resolved	30%	43%	33%	45%	53%	32%	29%	46%	60%	64%	57%	39%

These results have been shared with each care group and will continue to be monitored.

The Trust provides a number of methods for patients to provide unsolicited feedback. The Tell Us What You Think comment cards are available across the Trust and can be completed by patients whenever they wish, whether the feedback is positive or negative.

Patients can also submit feedback about their experience of the Trust anonymously via the Trust website (www.sth.nhs.uk) or via independent websites such as NHS Choices and Care Opinion (formally called Patient Opinion).

All feedback received is recorded and actioned by the Trust. Other sources of unsolicited feedback that may be received by other organisations' websites, such as Healthwatch, are also recorded and actioned, so the Trust can build a clear picture of what patients and relatives feel about their experience within the Trust.

Each piece of feedback received can cover a range of themes, and each theme is individually coded so that a thorough analysis can be undertaken.

The Trust also participates in a number of surveys that aim to give patients the opportunity to provide feedback on a range of aspects related to their care. These include:

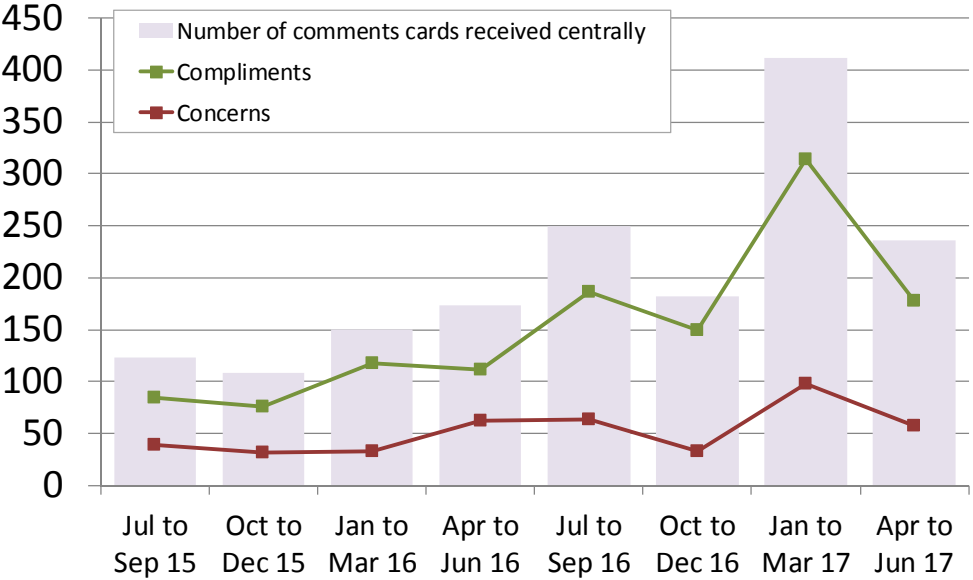
- The Friends and Family Test (FFT) which asks a simple, standardised question with response options on a 5-point scale, ranging from whether they are 'extremely likely' to 'extremely unlikely' to recommend our Trust to their family and friends. The FFT is carried out in inpatient, outpatient, A&E, maternity, and community services.

The Trust has also chosen to ask a follow-up question in order to understand why patients select a particular response.

- The Trust has developed a programme of local patient satisfaction surveys which were implemented from the 1st April 2016. These surveys are undertaken quarterly and aim to collect more detailed feedback on different aspects of care provided by the Trust.
- The Trust also participates in the CQC programme of national surveys. As and when results become available these will be featured in this report.

Feedback - Comment cards

During the period April to June 2017, 236 comments cards were completed, of which 491 individual themes have been identified.

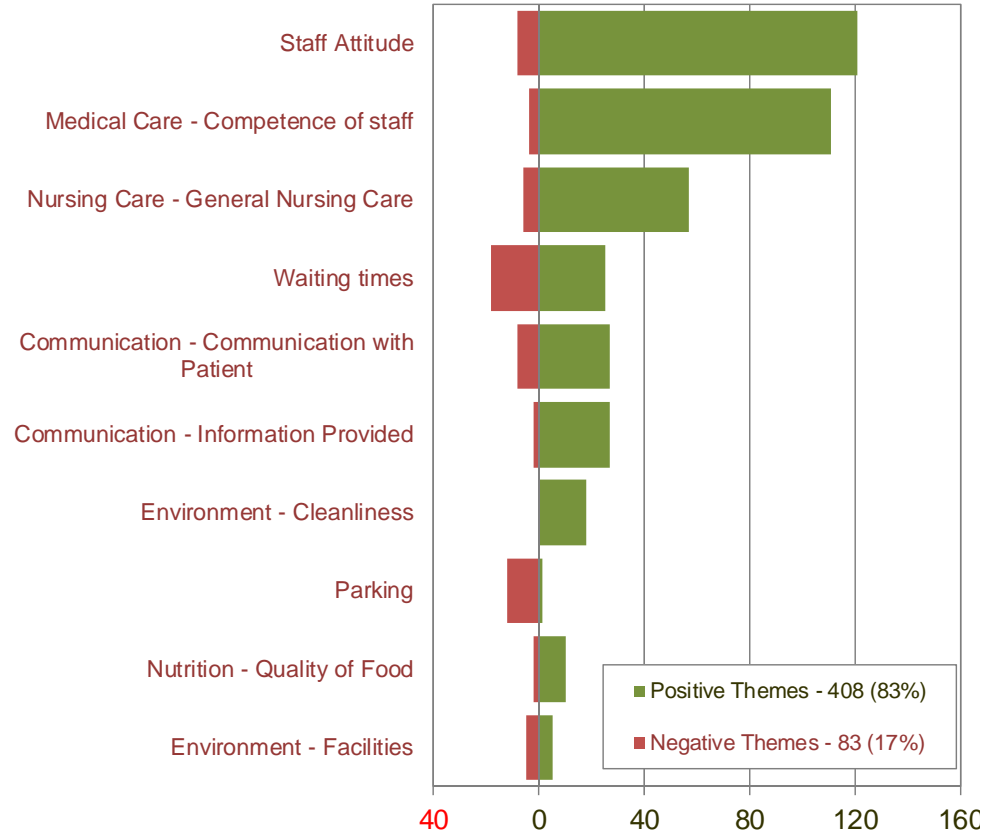


The chart above shows the comments cards received by quarter and the breakdown of these by compliments and concerns. Of all comment cards received this quarter 83% of the themes identified have been positive.

% of positive themes from all comments received centrally			
Current Quarter (Apr to Jun 2017)		Last 12 months (Jul 16 to Jun 17)	
%	QTY	%	QTY
83%	408	83%	1764

% of negative themes from all comments received centrally			
Current Quarter (Apr to Jun 2017)		Last 12 months (Jul 16 to Jun 17)	
%	QTY	%	QTY
17%	83	17%	358

Top 10 themes raised in comment cards between April and June 2017



The staff were very friendly and the whole place was very clean.

Everything went really well and I feel I had experienced staff who all knew what they were doing.

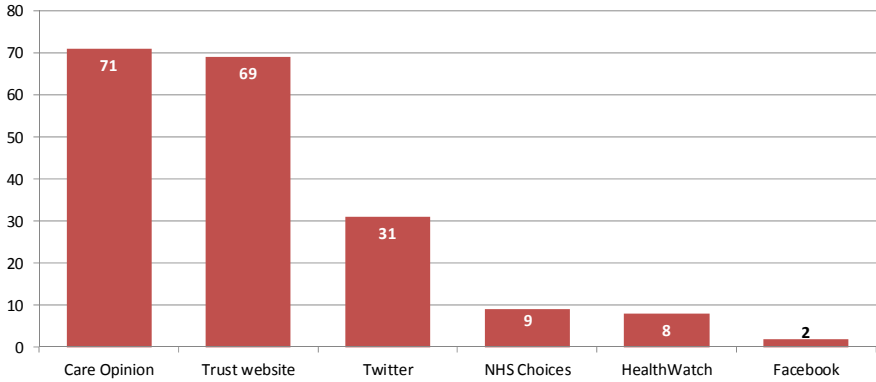
I have had many letters about my appointments (made it very confusing). I got here and they said that they couldn't see me until tomorrow.

Treatment was fine but we found the doctor didn't want to listen to us and our waiting time was over an hour.

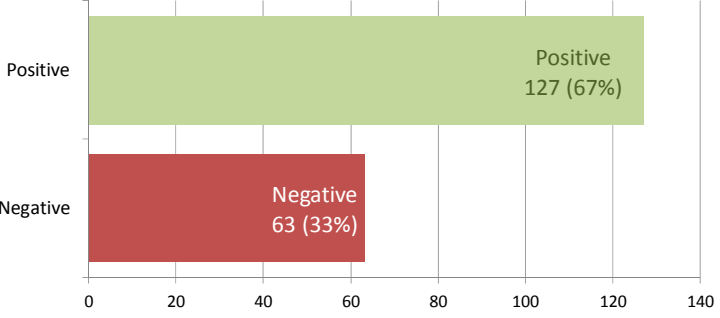
Feedback – Website and social media feedback

As well as the formal feedback methods on offer, visitors to the Trust also comment about their experience using popular web and social media sites. We continue to work with our surveys provider to develop how we extract patient feedback from these sites and report it alongside the feedback we receive from other sources.

The graph below shows that during the past quarter, 190 patient feedback comments have been left via popular social media and other websites about this Trust. It is expected that the number of comments received via Facebook will always be low due to the privacy settings that the site provides, as opposed to sites such as Twitter where the comments made are predominantly public, however, only comments which relate to the patient experience at the Trust are included. The breakdown of comments is as follows:



Overall the Trust has received more positive than negative feedback this quarter with 127 positive comments and 63 negative.



The table below shows a breakdown of the themes raised via web and social media sites relating to this Trust.

Theme	Positive	Negative	Positive and negative combined
Staff	42% (91)	34% (32)	39% (123)
General Care	20% (44)	17% (16)	19% (60)
Clinical Treatment	22% (47)	12% (11)	19% (58)
Communication	12% (26)	19% (18)	14% (44)
Waiting times	4% (8)	12% (11)	6% (19)
Environment	1% (2)	6% (6)	3% (8)

A selection of comments received from web and social media sites are presented below:

Every staff member that looked after me today was so lovely.
#sheffield #northerngeneral
(Twitter)

I arrived at A&E early hours of the morning and was literally about to fall as I walked in due to the severity of pain. All I saw were the receptionists talking amongst themselves whilst I waited behind the blue line.
(Care Opinion)

(I was) in and out very fast, sympathetic staff
(HealthWatch Sheffield)

I found the receptionist to be highly rude at times to patients
(STH website)

Feedback – Letters of thanks

As well as the formal methods of leaving feedback such as comment cards, website feedback, and the Friends and Family Test, the Trust also receives a high volume of unsolicited positive feedback in the form of ‘letters of thanks’.

In addition to the ‘letters of thanks’ received centrally, many more are received directly by wards and departments throughout the Trust. These are shared with relevant staff but currently it is not possible to systematically record them all.

The table below shows the number of ‘letter of thanks’ received centrally over the past 12 months by quarter:

Jul - Sep 2016	Oct-Dec 2016	Jan-Mar 2017	April - Jun 2017
159	157	172	128

This page presents a selection of thank you letters that have been received centrally. Each of the letters presented have been reproduced verbatim but with names and personal details removed.

Palliative Care Unit, Therapeutics & Palliative Care

Although [NAME] was only with you for a very short time I would like to thank you for the care and kindness you have [shown] to him and all our family.

He had the most wonderful attention from all the staff and we are very grateful.

Radiology, Medical Imaging & Medical Physics

I wanted to give some positive feedback to the radiology team. The three women working today are what all services in the NHS should aspire towards. I was quite nervous before my procedure but they were so lovely and professional and reassured me. They explained everything and were very kind. They did not rush me in anyway and they made me feel like I was important and not just another patient.

This is quite a sensitive procedure and at no point did I feel embarrassed. [NAME] who carried out the procedure itself was gentle and talked me through it and the other professionals were so friendly and really good at distracting me.

The feedback afterwards was also very informative. Thank you to these three women, they were wonderful and are what healthcare is all about!!

Ear, Nose and Throat, Head & Neck

I am writing to express my sincere thanks to the ENT Outpatients service and Day Surgery team at the Royal Hallamshire Hospital. I recently had a tonsillectomy under their care, and as health professional having insight into the procedure, I had been extremely anxious about the prospect. However, every aspect of my care, through outpatients, pre-operative assessment and the day of the surgery, was exemplary.

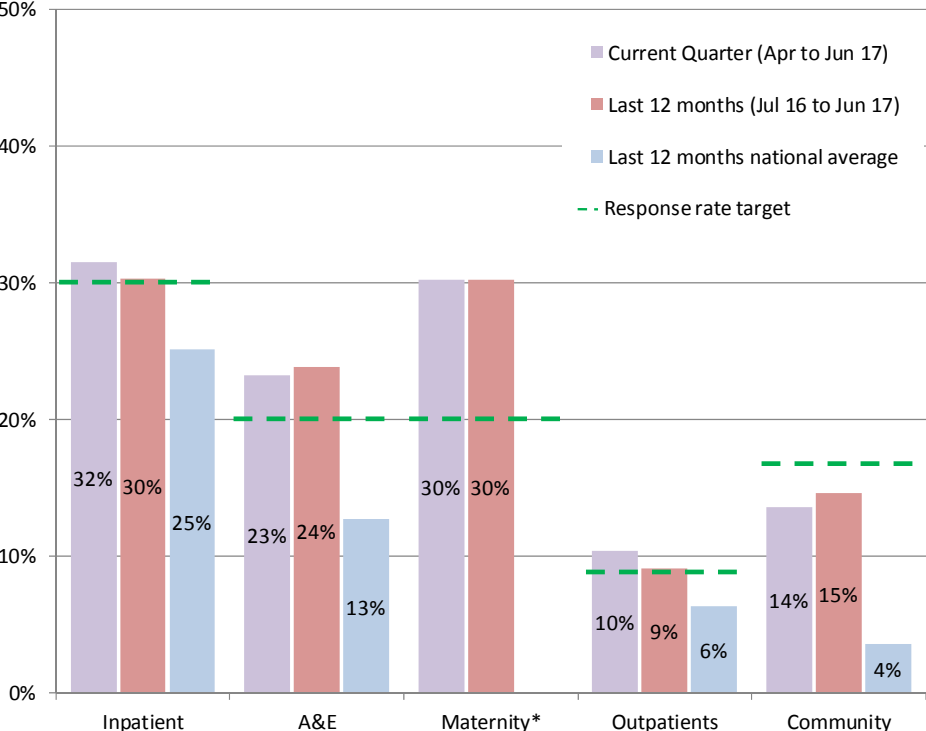
Through my journey I met a range of healthcare professionals, including receptionists, support workers, nurses, medics, anaesthetists and operating department practitioners. I was treated with respect and kindness throughout and the personalised care, teamwork and professionalism I encountered helped me feel safe.

I would be grateful if you could pass my genuine appreciation to the relevant staff.

Feedback - Friends & Family Test

The Friends and Family Test (FFT) is carried out across the Trust in inpatient, A&E, maternity services, outpatients and community services.

Response rates



* Eligible patient numbers for maternity are not published nationally, therefore it is not possible to provide a national average response rate.

Between April and June 2017, 9582 inpatients, 4237 A&E patients, 1355 maternity services patients, 23953 outpatients and 2880 community patients from the Trust completed the FFT survey, giving a total of 42007 responses this quarter.

The chart above shows that the Trust had higher response rates than the national average on all elements of the FFT during this quarter. To ensure there is an appropriate level of confidence in FFT scores, the Trust is working to internally set minimum response rate targets to ensure an appropriate sample size for each area is achieved. For April to June 2017, inpatient areas achieved a response rate of 32%, achieving the

30% target, A&E areas (including A&E, Emergency Eye Centre and Minor Injuries Unit) achieved 23%, achieving the 20% target, and maternity services achieved 30%, achieving the 20% target. Outpatients achieved 10%, achieving the 9% target, and community achieved 14%, below the 17% target.

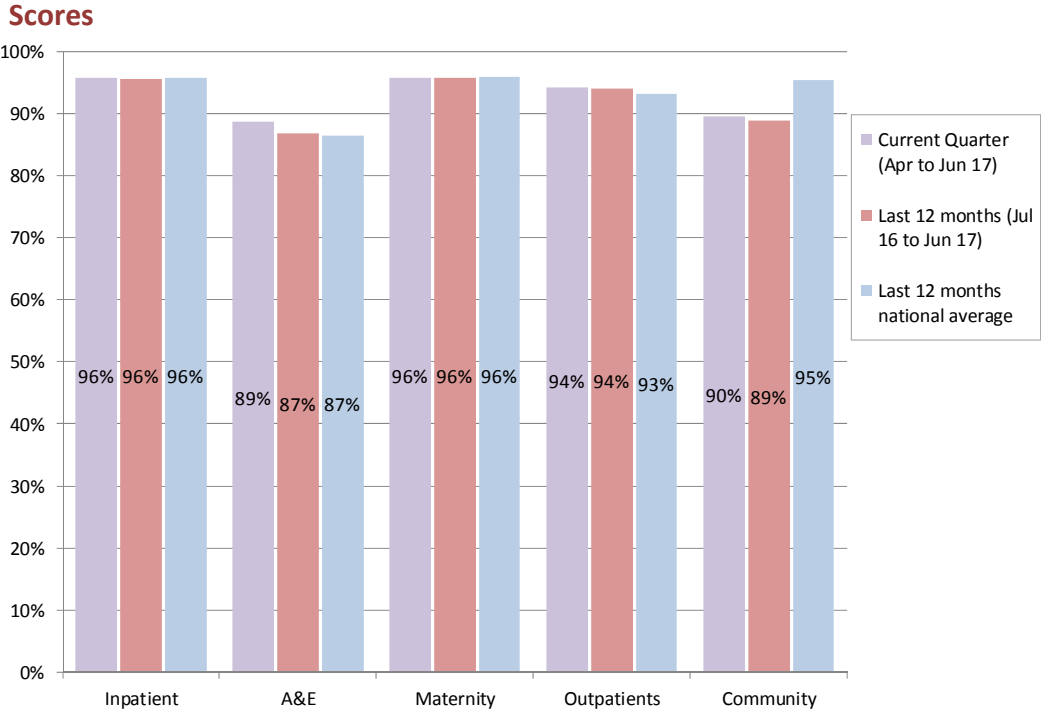
Highest performing wards/departments by response rate

	April to June 2017			Last 12 months (Jul 16 to Jun 17)
	Eligible Patients	Responses	Response Rate	
Brearley 6	91	90	99%	78%
Osborn 1	9	8	89%	82%
Osborn 4	24	20	83%	72%
Vickers 4	108	81	75%	69%
Osborn 3	31	23	74%	62%

Lowest performing wards/departments by response rate

	April to June 2017			Last 12 months (Jul 16 to Jun 17)
	Eligible Patients	Responses	Response Rate	
Teenage Cancer Unit	167	14	8%	11%
Firth 2	488	60	12%	16%
Huntsman 7	239	31	13%	22%
E1/E2	398	52	13%	17%
L1	635	94	15%	27%

Feedback - Friends & Family Test



improvement plan to improve their FFT score. Ward level inpatient FFT scores will be reviewed again by the Patient Experience Committee in November 2017 to identify if there has been any improvement.

Although there has been an improvement over the past 12 months, the overall negative score for Community Services continues to be higher than the 12 month national average. A deep dive has been undertaken into patient experience data for Community and will be reported in the September 2017 Integrated Performance Report. This deep dive involved reviewing all patient experience data for Community, including FFT, complaints, comment cards, website feedback and surveys, to identify common trends and areas in need of improvement. A summary of this paper will be featured in a future quarterly Complaints and Feedback Report.

The overall percentage of patients who ‘would recommend’ our service to friends and family from all 5 elements of the FFT was 94% this quarter, an improvement from the 93% achieved last quarter. The FFT continues to demonstrate that the vast majority of patients would recommend the Trust as a place to receive care and treatment.

During this quarter Inpatient (96%), A&E (89%), maternity (96%) and outpatient (94%) scores are all equal to or higher than the 12 month national average, however the score between April and June 2017 for Community is 5% lower than the 12 month national average.

Each month, the inpatient FFT score is either equal to or slightly below the 12 month national average. A review of FFT inpatient scores was undertaken and presented to the Patient Experience Committee in May 2017. This identified 22 wards whose FFT score was worse than the national average. These wards have been asked to develop a local

Feedback – Local patient satisfaction survey results

The following pages present results from the programme of local patient satisfaction surveys that was implemented from the 1st April 2016.

The table below presents the percentage of patients who gave a positive response to each question, for example ‘yes,’ or ‘yes, definitely/yes, to some extent’. Results are presented as either ‘better’ or ‘worse’ than the previous quarter using the following system:

- Green arrow indicates a ‘better’ score compared to the previous quarter
- Red arrow indicates a ‘worse’ score compared to the previous quarter

	Question	Apr to Jun 2016	Jul to Sep 2016	Oct to Dec 2016	Jan to Mar 2017	Apr to Jun 2017	12 months combined
INPATIENT SURVEY	Did you always feel safe whilst on the ward?	98%	98%	99% ↑	99%	97% ↓	98%
	Was the ward clean?	99%	98% ↓	99% ↑	99%	98% ↓	98%
	Did you have confidence and trust in hospital staff?	98%	98%	99% ↑	98% ↓	97% ↓	98%
	Did hospital staff treat you with respect and dignity?	99%	99%	99%	99%	99%	99%
	How would you rate your overall experience?	90%	92% ↑	95% ↑	93% ↓	94% ↑	94%
OUTPATIENT SURVEY	Did you get to choose your appointment?	56%	56%	50% ↓	44% ↓	45% ↑	50%
	Is the department easy to find?	95%	95%	96% ↑	95% ↓	96% ↑	96%
	Is it clean?	99%	98% ↓	99% ↑	99%	99%	99%
	Were you seen on time?	76%	71% ↓	76% ↑	74% ↓	78% ↑	74%
	Were you told how long you would have to wait?	55%	57% ↑	56% ↓	38% ↓	42% ↑	51%
	Did clinical staff listen, understand and answer your questions?	94%	95% ↑	96% ↑	95% ↓	94% ↓	95%
	Did you get enough information on any tests or treatment?	93%	93%	94% ↑	94%	93% ↓	93%
	Were you told what would happen next?	96%	96%	98% ↑	97% ↓	95% ↓	97%
	Overall, how would you rate the attitude of the staff in this department?	93%	91% ↓	95% ↑	95%	94% ↓	94%
	Has the main reason you came to the Outpatient Department been dealt with to your satisfaction?	84%	83% ↓	84% ↑	84%	83% ↓	84%
COMMUNITY SURVEY	The length of time I had to wait for my care from the community team to start was reasonable.	98%	97% ↓	91% ↓	93% ↑	94% ↑	94%
	The staff that cared for me had been given all the necessary information about my condition or illness from the person who referred me.	94%	96% ↑	94% ↓	93% ↓	93%	94%
	I was aware of our goals e.g. to be mobile and independent at home.	100%	95% ↓	94% ↓	95% ↑	92% ↓	94%
	I was involved in setting these goals.	96%	96%	88% ↓	90% ↑	99% ↑	93%
	I was as involved in discussions and decisions about my care, support and treatment as I wanted to be.	96%	95% ↓	91% ↓	92% ↑	95% ↑	93%
	The staff let me know how to contact them if I needed to.	96%	98% ↑	93% ↓	92% ↓	95% ↑	94%
	The appointment/visit times by staff were convenient for me.	98%	98%	98%	96% ↓	98% ↑	97%
	When I had important questions to ask the staff they were answered well.	96%	98% ↑	97% ↓	98% ↑	99% ↑	98%
	I had confidence and trust in the staff treating or supporting me.	100%	88% ↓	98% ↑	97% ↓	100% ↑	96%
	I felt informed of other services that are available to someone in my circumstances, including voluntary organisations.	95%	86% ↓	83% ↓	80% ↓	81% ↑	82%
	I was always involved and informed about decisions to refer me to other services for support.	98%	91% ↓	85% ↓	86% ↑	90% ↑	88%
	Overall, I felt I was treated with respect and dignity while I was receiving my care from this service.	100%	98% ↓	98%	99% ↑	100% ↑	99%
I feel less anxious/worried since having this service.	98%	98%	92% ↓	89% ↓	92% ↑	92%	

The table above shows the ‘positive’ results for each question by quarter. As we have been running these surveys since April 2016, we are now able to present the data for this quarter alongside the same period last year as well as the results for the past 12 month.

Key results for each survey are outlined on the following pages.

Feedback – Local patient satisfaction survey results

Inpatient satisfaction survey

The inpatient satisfaction survey is sent to a sample of patients by post following their discharge from hospital. The sample is drawn from one month each quarter. Patients from the sample are asked 6 core questions and a set of topic specific questions which are themed and changed each quarter.

During this quarter, a total of 1952 patients were sent the inpatient satisfaction survey. 631 returned a completed survey, giving a response rate of 32%. This compares to a response rate of 35% (680 patients) last quarter.

Key results:

Top 2 highest scoring questions (taken from all positive responses)

- 99% (618) of patients said ‘yes, definitely (92%) or ‘yes, to some extent’ (6%) that they were ‘always’ treated with respect and dignity, compared with 99% last quarter.
- 98% (612) of patients said the ward was ‘very clean’ (82%) or ‘fairly clean’ (16%), compared with 99% last quarter.

The lowest scoring question

- 94% (575) of patients rated their overall experience as either ‘Excellent’ (45%), ‘Very good’ (34%) or ‘Good’ (15%), compared with 93% last quarter.

Topic specific questions

As part of the inpatient satisfaction survey, there is also a programme of topic specific questions which change each quarter. The questions for 2017/18 will be repeated from those selected for the same quarter during 2016/17, allowing us to compare against the same period last year. This quarter, the themed questions focus on staff, noise, and nutrition.

Results to questions relating to staff:

- 98% (611) of patients responded ‘Yes, definitely’ (85%) and ‘Yes, to some extent’ (14%) when asked if they were made to feel welcome by staff when they arrived on the unit, compared with 98% during April and June 2016.
- 94% (571) of patients responded ‘Yes, always’ (62%) and ‘Yes, sometimes’ (32%) when asked if they felt there were enough nurses on duty to care for them, compared with 90% during April and June 2016.

- 98% (601) of patients responded ‘Yes, definitely’ (82%) and ‘Yes, to some extent’ (16%) when asked if they were made comfortable during their stay, compared with 97% during April and June 2016.

- 94% (388) of patients responded ‘Yes, always’ (69%) and ‘Yes, sometimes’ (24%) when asked if they felt they were seen quickly after pressing the assistance call button, compared with 93% during April and June 2016.

Results to questions relating to noise:

- 48% (288) of patients responded ‘No’ when asked if they were ever disturbed by noise at night, compared with 50% during April and June 2016.

Results to questions relating to nutrition:

- 70% (402) of patients rated the hospital food as either ‘Excellent’ (15%), ‘Very good’ (28%) or ‘Good’ (27%), compared with 66% during April and June 2016.
- 87% (208) of patients responded ‘Yes, always’ (65%) and ‘Yes, most of the time’ (23%) when asked if they always received the help they needed to eat, compared with 87% during April and June 2016.
- 90% (228) of patients responded ‘Yes, always’ (70%) and ‘Yes, most of the time’ (20%) when asked if they always received the help they needed to drink, compared with 92% during April and June 2016.

Next steps

These results will be shared with each individual ward so that local actions can be taken to identify areas of improvement. Results relating to food will be shared with Catering Services.

Being a deputy ward manager in another trust and knowing exactly what pressures the staff are put under I can honestly say that all the staff were kind, empathetic and extremely caring.

Not very informative to next of kin as I have hearing problems and English is not my first language which made it difficult for my family to know things.

Feedback – Local patient satisfaction survey results

Outpatient satisfaction survey

The outpatient survey is being conducted alongside the FFT survey. When a patient replies to their FFT survey via text, they are sent a follow up message and a web link to the outpatient satisfaction survey.

During this quarter, 12,901 eligible patients were sent the outpatient satisfaction survey. 262 of these patients completed the survey, giving a response rate of 2%. This compares to a response rate of 5% (664 patients) last quarter.

It is recognised that this is a low response rate, however given the high volume of outpatients, the number of individual responses received is high, meaning the data is robust. Therefore, given the low resource requirements for electronic surveys this method will continue to be used. The response rate will be monitored closely to identify whether the lower percentage this quarter is a one-off.

Key results:

Top 2 highest scoring questions (taken from all positive responses)

- 99% (204) of the patients that responded stated 'Yes' when asked if the outpatient department was clean, compared with 99% last quarter.
- 96% (197) of the patients that responded stated 'Yes' when asked if the department was easy to find, compared with 95% last quarter.

Top 2 lowest scoring questions (taken from all positive responses)

- 42% (51) of patients that responded stated they were told how long they would have to wait, compared with 38% last quarter.
- 45% (92) of patients that responded stated 'Yes' when asked if they got to choose their appointment, compared with 44% last quarter.

Next steps

As part of the Outstanding Outpatients Workstream of the Trust's Making it Better Programme, these results will be shared with the Trust's Service Improvement Team who will monitor survey results on an ongoing basis to note any changes over time as a result of this workstream.

Always very helpful and kind and understanding.

Waiting for medication is sometimes a problem.

I can't speak highly enough of the treatment I have had or the manner in which it was given. Each and every member of staff have treated me with kindness and dignity.

More communication with the waiting area is required. After 45 minutes waiting I was left feeling I had been forgotten.

Feedback – Local patient satisfaction survey results

Community satisfaction survey

The community satisfaction survey is undertaken as a postal survey, sent directly to the patient's home address, along with a pre-paid envelope. 1132 eligible patients were sent the community satisfaction survey, of which 100 patients responded, giving a response rate of 9%. This compares to a response rate of 24% (214 patients) last quarter. The response rate will be monitored closely to identify whether the lower percentage this quarter is a 'one-off'.

Key results:

Top 2 highest scoring questions (taken from all positive responses)

- 100% (75) of patients stated 'Yes, always' (87%) and 'Yes, sometimes' (13%) when asked if they have confidence and trust in the staff treating them, compared with 97% last quarter.
- 100% (93) of patients stated 'Yes, always' (97%) and 'Yes, sometimes' (3%) when asked if overall they felt they were treated with respect and dignity, compared with 99% last quarter.

Top 2 lowest scoring questions (taken from all positive responses)

- 90% (71) of patients responded 'Yes, definitely' (63%) and 'Yes, to some extent' (27%) when asked if they were involved and informed about decisions to refer them to other services for support, compared with 86% last quarter.
- 81% (66) of patients responded 'Yes, definitely' (49%) and 'Yes, to some extent' (32%) when asked if they felt informed of other services that are available to someone in their circumstances, compared with 80% last quarter.

Next steps

These results will be reviewed by each relevant community service to identify which services are performing well and which ones are receiving a high number of negative responses. Results from this survey have also been included in the deep dive into patient experience data for Community Services which will be reported in the September 2017 Integrated Performance Report.

The community services are very good, when I need them they come straight away.

Continuity of the same person and time would have been helpful.

The community nurse was very well informed and the activity program has been good for regaining confidence.

The only comment I have is that the physio was running 20 mins late and my husband was waiting a long time.

Feedback - 2016 National Inpatient Survey results

The National Inpatient Survey 2016 was carried out across 149 acute and specialised NHS trusts. All adult patients (aged 16 and over) who had spent at least one night in hospital and were not admitted to maternity or psychiatric units during July 2016 were eligible to be surveyed. 1180 eligible patients from this Trust were sent a survey, and 502 were returned, giving a response rate of 43%. This is compared to the national response rate of 44%.

Performance compared to the previous surveys

Compared to last year, the Trust did not score significantly better on any questions, but significantly worse on 1 question.

Question where the Trust scored significantly worse in 2016:

Question	2011	2012	2013	2014	2015	2016
Planned admission: admission date changed by hospital	9.2 / 10	9.3 / 10	9.2 / 10	9.2 / 10	9.5 / 10	9.2 / 10

As the table above shows, although the score for this question is significantly worse in 2016 compared to 2015, it has returned to the same score achieved in most previous years.

Performance compared to other trusts

Compared to other trusts participating in the survey, this Trust scored 'about the same' on all questions. This is a slight improvement on 2015 where the Trust scored 'about the same' as other trusts on all questions except one, where we scored worse, this question is presented below:

Question	2015	2016	2016 All trusts
The hospital and ward: Did you ever use the same bathroom or shower area as patients of the opposite sex?	7.7 / 10	8.1 / 10	8.1 / 10

The guidance allows for bathrooms to be shared where they contain specialist equipment. The National Inpatient Survey does not allow patients to comment on whether they needed bathrooms with specialist equipment and this can affect the score for this question. Following the 2015 survey, further work was undertaken to see if signage can be improved regarding this issue, this may be the reason behind the improved score during 2016.

Benchmarking

The table below shows how this Trust performed against the 10 large acute NHS providers that form the Shelford Group on the question relating to the 'overall experience' of the patient as well as how each trust scored last year:

Patients who felt they had a good experience

Trust	2015	2016
1 The Newcastle Upon Tyne Hospitals	8.6	8.5 ↓
2 University College London Hospitals	8.4	8.4
3 Cambridge University Hospitals	8.1	8.4 ↑
4 University Hospitals Birmingham	8.4	8.3 ↓
5 Guy's And St Thomas'	8.3	8.3
6 Oxford University Hospitals	8.3	8.3
7 Imperial College Healthcare	7.9	8.2 ↑
8 Sheffield Teaching Hospitals	8.2	8.1 ↓
England Average	8.1	8.1
9 King's College Hospital	8.1	8.0 ↓
10 Central Manchester University Hospitals	8.0	8.0

Improving the experience of patients

Overall, this Trust saw an improvement on 24 out of 65 questions in 2016 compared with 2015, the same score was achieved on 11 questions, and scores deteriorated on 30 questions. However, the Trust performance is in line with national scores. Survey results and comments will be considered alongside other patient experience data, in order to agree an action plan to ensure improvements are made.

Feedback - 2016 National Inpatient Survey patient comments

A sample of patient comments about our Trust from the National Inpatient Survey 2016

Positive Comments

During my stay in hospital I found staff of all grades to be professional, friendly, helpful & kind. The staff I encountered made what could have been a frightening experience feel as pleasant as possible.

Treated with great respect & dignity by all the hospital staff.

Communication with the doctors and anaesthetist was v good - clear & concise re procedures etc. Nursing staff had a good bed-side manner & were friendly as was the OT.

The nursing staff was excellent, nothing was too much trouble for them. The auxiliary staff was also excellent the clearers did a fantastic job and the porters couldn't fault them 5 stars all the way.

The attitude and professionalism of the medical/portering staff was absolutely outstanding. Friendly and purposeful.

Negative Comments

Nursing staff seemed sparse and didn't regularly check in with me - except to take my blood pressure and temperature every few hours but with little chat.

There was definitely not enough staff at night. I asked for pain relief on a number of occasions but did not receive any, some of the night nurses were very rude.

Discharge planning was disgusting! I am under the impression there are discharge nurses. Never saw one!

Despite prior knowledge about when I was due to leave nothing was done to prepare any of the medication I was to take home until that morning. I was told I could go by 10.30 am but no one could be found to sort the medication out.

The toilet seats were very uncomfortable, you could not stay for very long.