

COMPLAINTS AND FEEDBACK REPORT

October to December 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	Highlights
Complaints	<ul style="list-style-type: none"> There has been a slight increase in the number of formal complaints with 358 received this quarter, compared with 356 between July and September 2017. At the end of December 2017, 7% (6) of all open complaints remain overdue, an increase from 3% (4) at the end of September 2017. This is the third consecutive quarter that has seen the number of open and overdue complaints increase. Following a review by the Parliamentary Health Service Ombudsman (PHSO) this quarter, the Trust was informed that 1 of the 2 complaints that had been reviewed by the PHSO were partially upheld. This is outlined in the report. <p>ACTION:</p> <ul style="list-style-type: none"> The number of open and overdue complaints will continue to be monitored on a weekly basis, and should they continue to increase, measures will be put in place to ensure this is effectively managed. 	<ul style="list-style-type: none"> The number of informal concerns received this quarter decreased from 420 between July and September 2017 to 409 between October and December 2017. By combining the number of formal complaints and informal concerns received, a total of 767 were raised between October and December 2017, a decrease from 776 received last quarter. At the end of the third quarter for 2017/18, the year to date performance of responding to complaints within the agreed timescale is 94%, above the 85% target. Compared to last quarter, the complainant satisfaction survey has seen the number of positive responses increase or remain the same on 12 of the 15 questions.
Friends and Family Test (FFT)	<ul style="list-style-type: none"> The FFT response rate for community between October and December 2017 is 11%, below the 12.5% target and the response rate for A&E was 19%, below the 20% target. For October to December 2017, the inpatient FFT score (95%) is 0.4% lower than the 12 month national average, the maternity scores (94%) is 1.7% lower and the community score (87%) is 8.5% lower. <p>ACTION</p> <ul style="list-style-type: none"> Historically, response rates tend to be lower in December due to the festive period; therefore we would expect response rate to increase during quarter 4. A deep dive has been undertaken and was submitted as part of the September 2017 Integrated Performance Report into patient experience data for Community. A summary of this deep dive is featured in the report. 	<ul style="list-style-type: none"> Following a successful 3 month pilot to cap the number of FFT surveys being sent to outpatients, it has been agreed to keep the cap in place. As a result, the Patient Experience Committee (PEC) has agreed to reduce the outpatient FFT target from 9% to 7%. In addition, following a deep dive into patient experience data for community, the community FFT response rates have been reviewed and due to a number of changes that have taken place in community since the target was originally set, PEC has been agreed to amend the community FFT target from 17% to 12.5%. For October to December 2017, inpatients (30%), maternity (33%) and outpatients (8%) achieved the internally set FFT response rate targets. For October to December 2017, the A&E (87%) 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"> The outpatient local satisfaction survey has shown a deterioration on 6 out of 10 questions. <p>ACTION</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.
National Surveys	<ul style="list-style-type: none"> In the 2016 National Accident and Emergency Survey, the Trust scored significantly worse than the national average on 2 questions. These related to not waiting for more than 15 minutes to speak to a doctor or nurse and not having felt threatened by other patients or visitors. In addition, the Trust scored significantly worse on 3 questions in 2016, compared to 2014. These are outlined in the report. <p>ACTION:</p> <p>Survey results and comments have been shared with the Acute and Emergency Directorate who are considering the results alongside other patient experience data, and are in the process of agreeing an action plan.</p>

Highlights
<ul style="list-style-type: none"> Results in the inpatient local satisfaction survey has shown performance to have improved or remained the same on all questions between October and December 2017 and the community local satisfaction survey has seen 9 out of 13 questions either improve or remain the same as last quarter. <p>Themed questions</p> <ul style="list-style-type: none"> Compared to the same period last year, 4 questions out of 5 relating to communication from the inpatient local satisfaction survey have either seen an improvement or remained the same. <p>Carers and Young Carers Survey</p> <ul style="list-style-type: none"> Results from the Carers and Young Carers survey, which was conducted between October and December 2017, are featured in this report. This survey will be repeated in June 2018.
<ul style="list-style-type: none"> In the 2016 National Accident and Emergency Survey, the Trust scored significantly better than the national average on 1 question, which relates to being told who to contact if worried after leaving hospitals. In addition, the Trust scored significantly better on 3 questions in 2016, compared to 2014. These are outlined in the report.

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: October to December 2017				
	Formal complaints (445)	Informal concerns (398)	Friends & Family Test* (2179)	Local Patient Satisfaction Surveys* (439)	Website and comment cards (151)
Waiting times	5 (5)	2 (2)	1 (1)	6 (5)	2 (3)
Communication	3 (3)	1 (1)	3 (4)	4 (6)	1 (1)
Staff attitude	4 (4)	4 (4)	2 (2)	2 (1)	5 (4)
Clinical care and treatment	1 (1)	3 (3)	4 (3)	5 (3)	6 (6)
Nursing care	2 (2)	5 (8)	5 (5)	1 (2)	4 (5)
Environment	8 (8)	8 (5)	6 (6)	3 (7)	3 (2)
Cancellations	9 (9)	6 (6)	7 (7)	7 (8)	8 (10)
Discharge	7 (7)	9 (9)	9 (9)	8 (4)	9 (9)
Resources	6 (6)	7 (7)	10 (10)	- (-)	10 (8)
Food and nutrition	10 (10)	10 (10)	8 (8)	- (-)	7 (7)

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 Website feedback/comment cards. ‘Waiting times’ is the most raised negative theme from the Friends and Family Test and ‘Nursing Care’ is the most raised negative theme from local patient satisfaction surveys. 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.

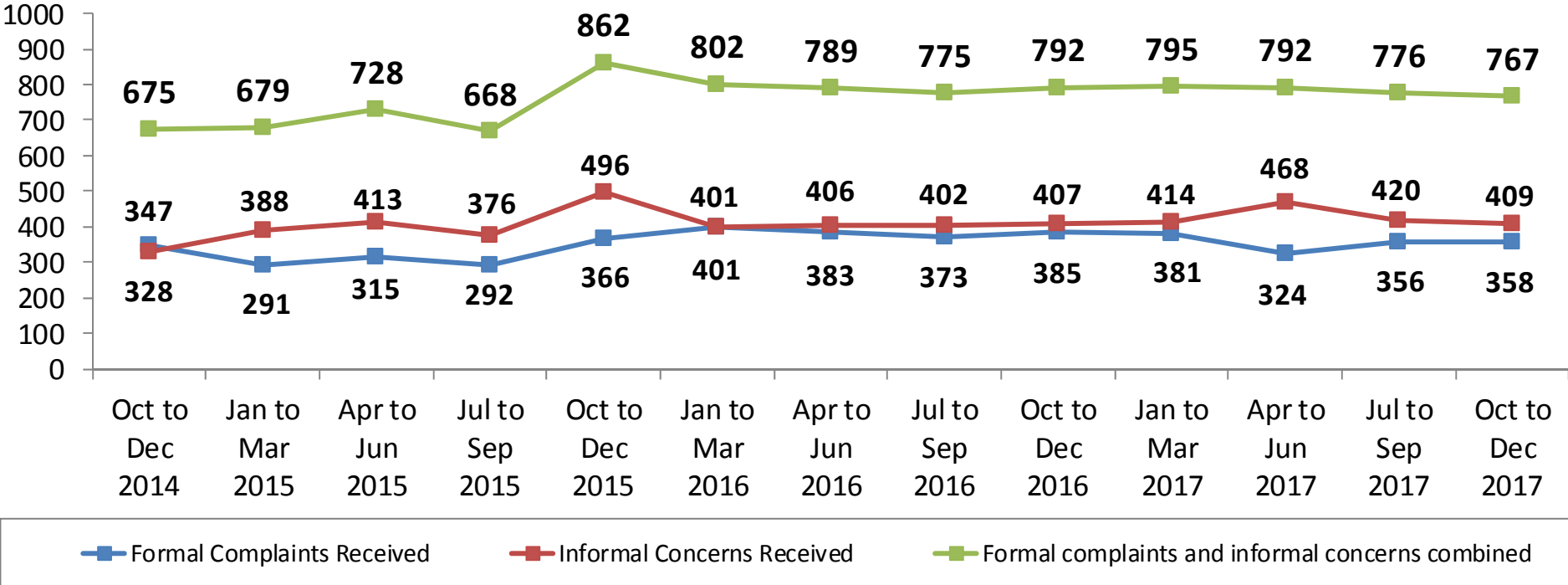
The Trust carries out a complainant satisfaction survey, which asks for feedback from complainants on how the Trust managed their concerns. Results of the survey are featured in each report along with any related actions.

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



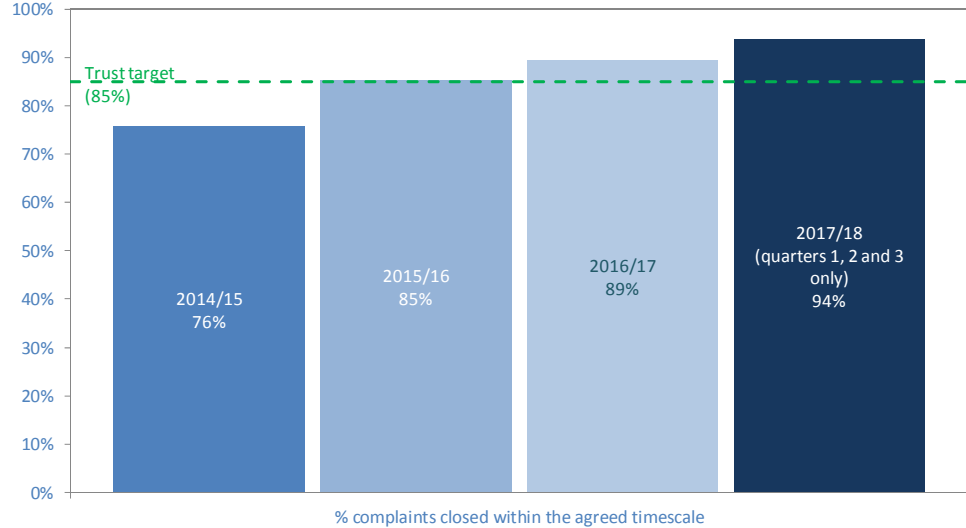
During this quarter 358 new formal complaints were received, a slight increase from 356 received last quarter. 409 informal concerns were received this quarter, compared with 420 last quarter. By combining the number of formal complaints received and the number of informal concerns, a total of 767 were raised between October and December 2017, a decrease from the 776 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 8 quarters it has not returned to the numbers of combined complaints and concerns previously seen.

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

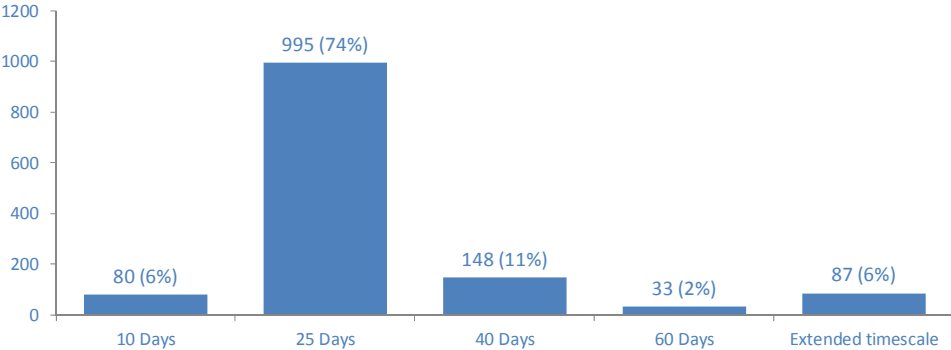
The Trust works to a tiered response times process. Complaints are graded by risk based on the complexity of the concerns raised. Each risk level determines the length of time allocated for responding to the complaint; which is then agreed with the complainant from the outset.

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 1343 formal complaints that have been closed ‘on time’ over the past 12 months (January to December 2017), the chart below presents the breakdown by the response timescales agreed through the tiered response times process:

Allocation of tiered response timescales

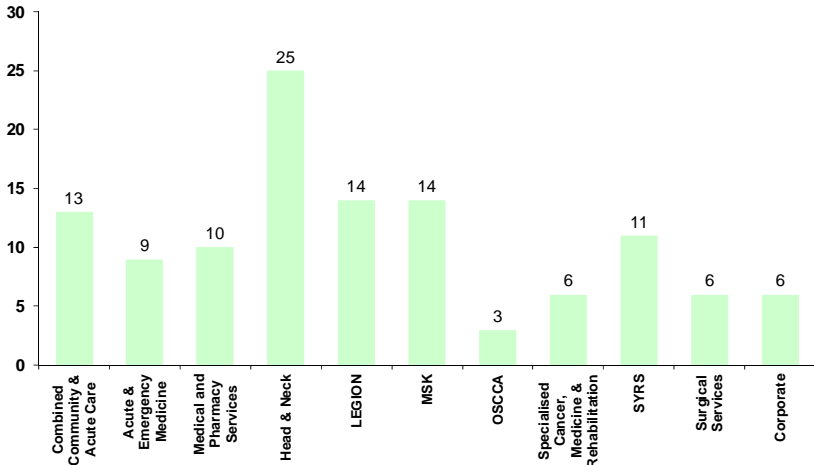


The chart above shows that over the past 12 months 6% of closed complaints have had their timescales extended, the same as was reported last quarter. It is understood that there will always be a proportion of complaints that will require an agreed extension. The reasons for requiring an extended complaint timescale can include:

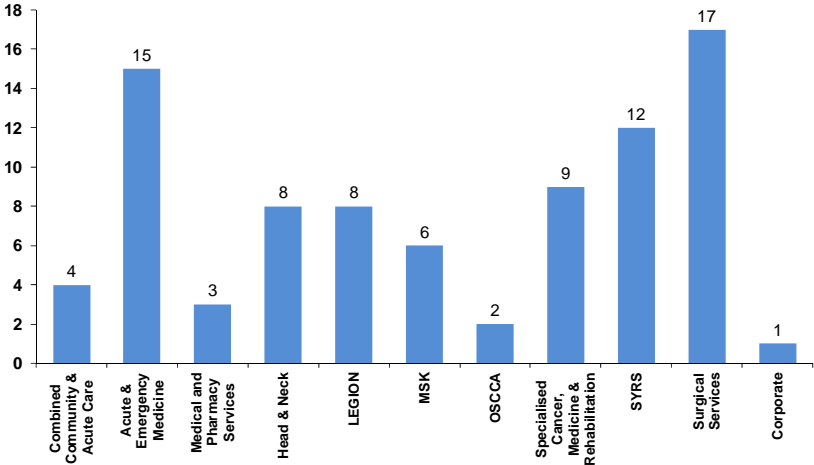
- New information adding to the complexity of the complaint
- Complainant/clinician availability for meeting times

Complaints – Status of closed and open complaints

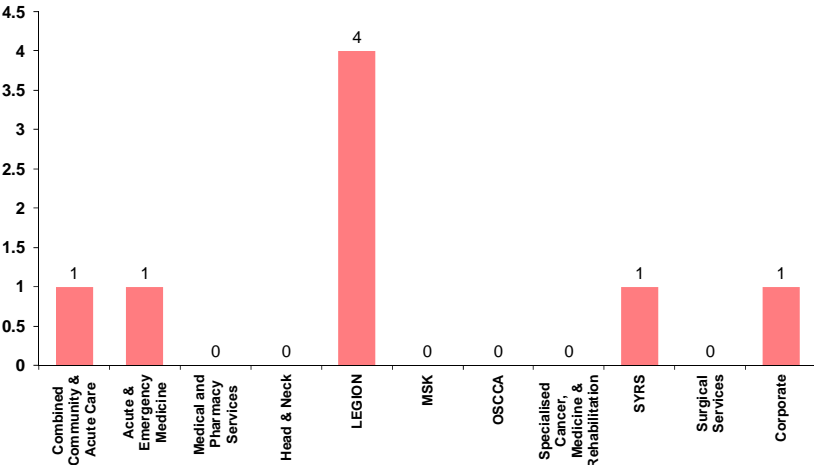
Number of formal complaints closed and in time (or extended) (in Dec 2017)



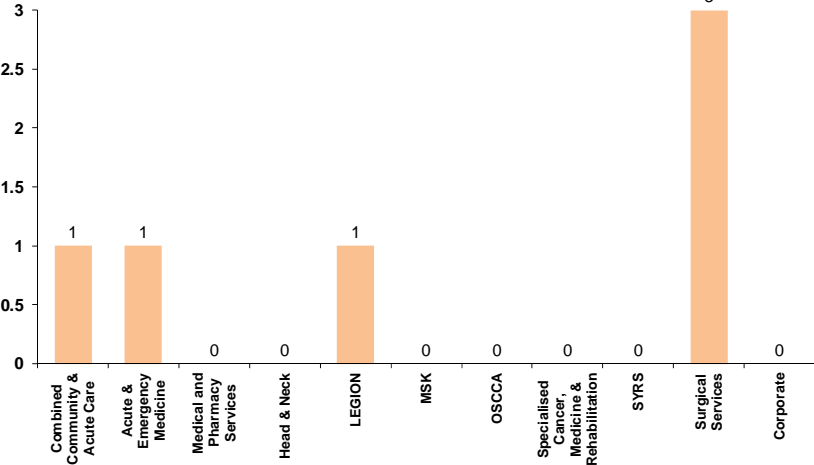
Number of formal complaints open and in time (or extended) (at end of Dec 2017)



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



Number of formal complaints open and overdue (at end of Dec 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 December 2017, as the number of overdue complaints changes daily as does the number of complaints closed.

At the end of December 2017, 7% (6) of all open complaints remain overdue, an increase from 3% (4) at the end of September 2017.

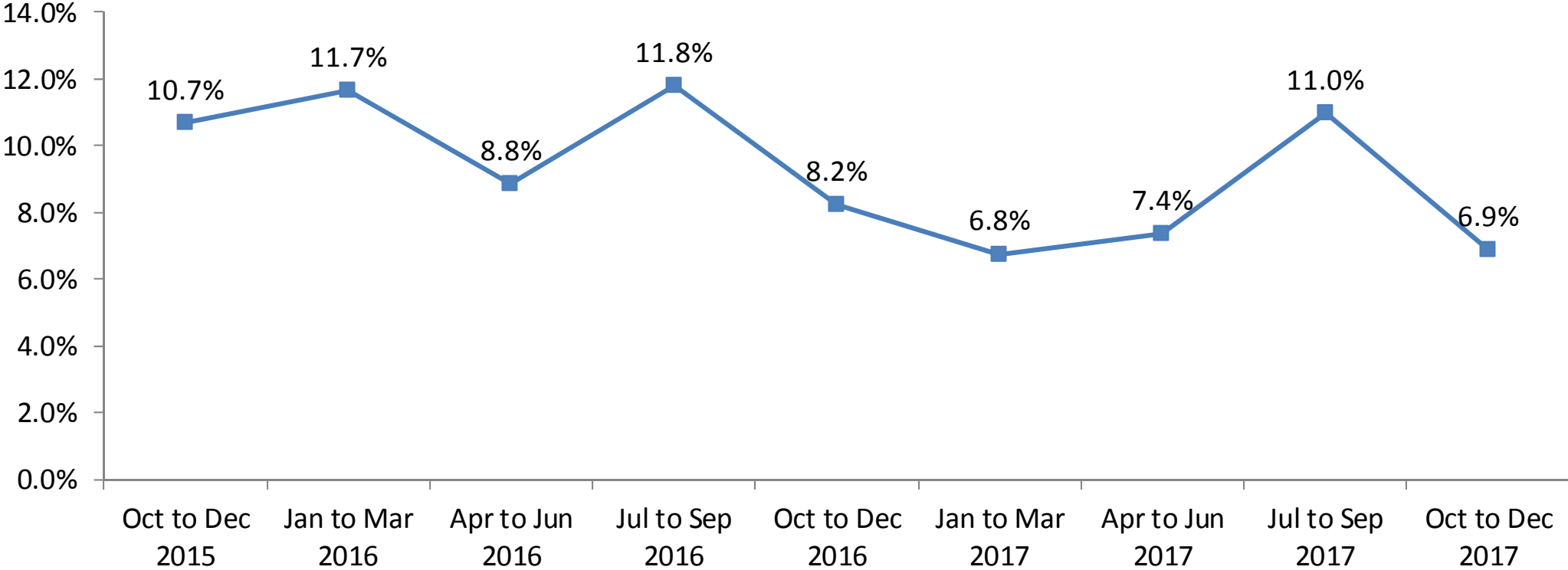
Complaints – Re-opened complaints

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.

There is often a delay from when a final response letter is sent to when a complaint may be re-opened. Due to this, figures for July to September 2017 and particularly October to December 2017 are likely to increase as complaints closed in these quarters may be reopened in subsequent months.

The graph below presents the percentage of complaints closed each month that were subsequently re-opened, and shows a relatively level number of re-opened complaints each quarter, 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
(October to December 2017)**

#	Subject	Qty	% of all subjects raised
1	Communication with patient	142	17%
2	Communication with relative / carer	56	7%
3	Attitude	52	6%
4	Appropriateness of medical treatment	38	5%
5	General nursing care	28	3%
6	Competence of medical staff	26	3%
7	Delay in treatment	25	3%
8	Unhappy with outcome of surgery	24	3%
9	Choice of medical treatment	21	2%
9	Waiting time for follow-up appointment	21	2%

**Last 12 months
(January to December 2017)**

#	Subject	Qty	% of all subjects raised
1	Communication with patient	654	19%
2	Attitude	223	7%
3	Communication with relative / carer	219	6%
4	Appropriateness of medical treatment	156	5%
5	General nursing care	123	4%
6	Waiting time for follow-up appointment	96	3%
7	Delay in treatment	86	3%
8	Unhappy with outcome of surgery	79	2%
9	Access to information	75	2%
10	Competence of medical staff	67	2%

Of the 142 subjects coded against 'communication with patient' between October and December 2017, 107 (75%) 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

	Attitude	Appropriateness of medical treatment	Communication with patient	Competence of medical staff	Unhappy with outcome of surgery	General nursing care	Choice of medical treatment	Delay in treatment	Communication with relative / carer	Communication between staff
Acute and Emergency Medicine	7	3	4	1	0	1	3	3	3	2
Combined Community and Acute Care Group	2	1	1	1	0	4	0	0	1	1
Head and Neck Services	10	6	5	2	10	3	1	5	2	1
Diagnostic and Therapeutic and OGN	5	1	8	5	0	1	1	0	0	1
Medicine and Pharmacy Services	3	1	3	3	0	2	2	0	0	0
Musculoskeletal	4	5	0	5	3	2	5	1	0	1
Operating Services, Critical Care and Anaesthesia	1	1	1	0	0	3	0	0	1	0
South Yorkshire Regional Services	3	7	2	2	2	1	1	2	1	0
Specialised Cancer, Medicine and Rehab	1	4	2	2	0	0	0	2	1	1
Surgical Services	1	8	8	5	9	6	8	3	3	1
Trust Wide Departments	1	0	1	0	0	0	0	0	0	0
TOTAL	38	37	35	26	24	23	21	16	12	8

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 October and December 2017 are 'attitude' (38) and 'appropriateness of medical treatment' (37).

'Attitude' is the most frequently raised subject for 4 care groups, and raised on 1 occasion, along with 4 other subjects, for Operating Services, Critical Care & Anaesthesia. Along with 'Unhappy with outcome of surgery', 'Attitude' is the subject that has been raised more than any other subject for a single care group, with both being raised 10 times in Head & Neck services.

In relation to the complaints about 'attitude' and 'unhappy with outcome of surgery' in Head and Neck, most of these complaints relate to patients disagreeing with the diagnosis and/or proposed treatment. Complaints relating to these subjects are often high within Head and Neck.

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

	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	Jul to Sep 17	Oct to Dec 17	2017/18
Number of new PHSO cases	11	8	29	6	3	7	4	20	4	5	6	7	22	5	1	3	9
Number of PHSO decisions	3	6	23	9	9	8	5	31	8	6	6	2	22	1	5	2	8
Number of PHSO cases fully or partly upheld	0	0	3	3	1	1	2	7	3	2	2	1	8	0	1	1	2

New PHSO cases this quarter

This quarter, 3 new information requests have been received, these relate to the following directorates:

- **Labs, Engineering, Gynaecology, Obstetrics, Neonatology**
 - Assisted Conception (1)
- **Head and Neck**
 - Neurosciences (1)
- **Surgical Services**
 - General Surgery (1)

New PHSO decisions this quarter

There were 2 new decisions received from the PHSO during this quarter, of which 1 was partially upheld:

Gynaecology (PARTIALLY UPHELD)

The complainant raised a number of concerns regarding the care and treatment provided by a consultant obstetrician and gynaecologist to the complainants' late wife. It was felt by the complainant that the consultant failed to diagnose ovarian cancer at the earliest opportunity and failed to carry out an internal examination.

The Ombudsman investigation found that overall the records available indicate the consultant did not follow established good practice and GMC guidance. There was a failure to complete an examination of the patient and to consider cancer in the differential diagnoses of abdominal pain. The consultant did not think fibroids were the cause of the pain but did not request further appropriate investigations to investigate the cause further.

The Ombudsman looked to see whether an earlier blood test or an earlier CT scan would have changed events. It was felt that these would have not altered events, and although failings have been identified, the Ombudsman cannot say from the evidence available that these would have impacted on the short or long term treatment or situation for the patient.

Therefore, the Ombudsman partially upheld the complaint and requested that the Trust write to the complainant to confirm the concerns raised by the Ombudsman and that these will be shared with the gynaecologist's responsible officer with a view to reflection and learning.

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 October and the 31st December 2017, 83 complainants responded to the survey, giving a response rate of 37%. This is higher than the response rate of 13% (37 complainants) achieved last quarter.

Key results

Top 2 most positive results

- 79% (59) of complainants who responded stated that they ‘Definitely agree’ (56%) or ‘Partially agree’ (23%) that they were told what they could do if they were unhappy with their response, compared with 64% last quarter.
- 78% (60) of complainants who responded stated that they ‘Definitely agree’ (55%) or ‘Partially agree’ (23%) that the response to their complaint was easy to understand, compared with 85% last quarter.

Bottom 2 most negative results

- 24% (18) of complainants who responded stated that they ‘Definitely agree’ (16%) or ‘Partially agree’ (8%) that they were confident improvements have been made as a result of their complaint, compared with 18% last quarter.
- 48% (36) of complainants who responded stated that they ‘Definitely agree’ (29%) or ‘Partially agree’ (19%) that they considered their complaint to be resolved, compared with 41% last quarter.

Compared to last quarter, 10 questions have seen their score improve this quarter, 3 have seen deterioration and 2 questions have remained the same. 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 and joined the Trust in January 2018. A review of the complainant satisfaction survey and audit process is scheduled to be undertaken.

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	Oct to Dec 2016	Jan to Mar 2017	Apr to Jun 2017	Jul to Sep 2017	Oct to Dec 2017	Past 12 months (Jan 17 to Dec 17)
Information on how to make a complaint was easy to find	75% ↑	75%	50% ↓	69% ↑	72% ↑	67%
It was easy to make a complaint	86% ↑	83% ↓	64% ↓	78% ↑	78%	76%
I was told about help available to make a complaint, such as independent advocacy	60% ↑	45% ↓	39% ↓	45% ↑	53% ↑	46%
I was given a choice as to how my complaint would be responded to	73% ↑	56% ↓	64% ↑	64%	65% ↑	62%
I was told how long it would take to answer my complaint	86% ↑	75% ↓	67% ↓	66% ↓	78% ↑	73%
I was kept informed of any delays in responding to my complaint	68% ↑	56% ↓	59% ↑	50% ↓	69% ↑	60%
The response was easy to understand	72% ↑	74% ↑	84% ↑	85% ↑	78% ↓	79%
My concerns were addressed in an open and honest way	60% ↑	55% ↓	63% ↑	56% ↓	63% ↑	60%
I was told what action had been taken as a result of my concerns	67% ↑	55% ↓	76% ↑	57% ↓	57%	61%
I feel my complaint was taken seriously	70% ↑	58% ↓	61% ↑	48% ↓	66% ↑	60%
I was told what I could do if I was unhappy with my response	83% ↑	68% ↓	80% ↑	63% ↓	79% ↑	74%
I am satisfied with how the complaint was handled	50% ↑	40% ↓	52% ↑	50% ↓	49% ↓	47%
My complaint was dealt with quickly enough	63% ↑	53% ↓	63% ↑	70% ↑	68% ↓	63%
I am confident that improvements have been made as a result of my complaint	24% ↑	36% ↑	23% ↓	18% ↓	24% ↑	26%
I consider my complaint to be resolved	46% ↑	42% ↓	48% ↑	41% ↓	48% ↑	45%

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

Although I was mostly satisfied with the response to my complaint the person in question did not say sorry. I was told that the person realised her mistakes but her aggressive manner was not explained.

I feel the complaint was handled in a routine way in which any other complaint would be dealt with e.g. routine letters, phone calls etc..

I was pleased to be told that future patients will be given the information that I had found lacking as a result of my complaint.

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 (January 2017 to December 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 (January 2017 to December 2017)

	Acute and Emergency Medicine	Combined Community and Acute Care	Head and Neck Services	LEGION	Medical and Pharmacy Services	Musculoskeletal	OSCCA	South Yorkshire Regional Services	Specialist Cancer, Medicine and Rehabilitation	Surgical Services	Trust Wide Departments	Trust total
Total number of responses	30	16	34	31	19	26	6	16	18	30	11	237
Information on how to make a complaint was easy to find	63%	46%	59%	61%	76%	73%	100%	73%	78%	67%	80%	67%
It was easy to make a complaint	65%	57%	71%	71%	83%	82%	100%	94%	83%	70%	100%	76%
I was told about help available to make a complaint, such as independent advocacy	43%	42%	53%	34%	54%	35%	50%	69%	56%	48%	33%	46%
I was given a choice as to how my complaint would be responded to	73%	43%	81%	75%	94%	61%	80%	69%	62%	83%	58%	62%
I was told how long it would take to answer my complaint	65%	62%	52%	67%	90%	34%	50%	53%	67%	63%	60%	73%
I was kept informed of any delays in responding to my complaint	48%	57%	55%	63%	76%	61%	75%	67%	61%	72%	71%	60%
The response was easy to understand	89%	73%	71%	80%	94%	64%	83%	80%	81%	76%	100%	79%
My concerns were addressed in an open and honest way	50%	67%	49%	60%	94%	44%	50%	53%	69%	63%	80%	60%
I was told what action had been taken as a result of my concerns	48%	72%	55%	70%	88%	52%	50%	67%	63%	52%	70%	61%
I feel my complaint was taken seriously	46%	73%	47%	57%	82%	45%	60%	60%	75%	63%	80%	60%
I was told what I could do if I was unhappy with my response	58%	67%	83%	71%	94%	68%	83%	80%	87%	67%	70%	74%
I am satisfied with how the complaint was handled	31%	60%	28%	45%	76%	37%	50%	47%	63%	55%	70%	47%
My complaint was dealt with quickly enough	38%	66%	64%	66%	83%	54%	67%	60%	63%	70%	100%	63%
I am confident that improvements have been made as a result of my complaint	23%	36%	23%	31%	47%	14%	0%	26%	44%	14%	22%	26%
I consider my complaint to be resolved	30%	57%	35%	48%	59%	32%	17%	60%	69%	48%	50%	45%

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:

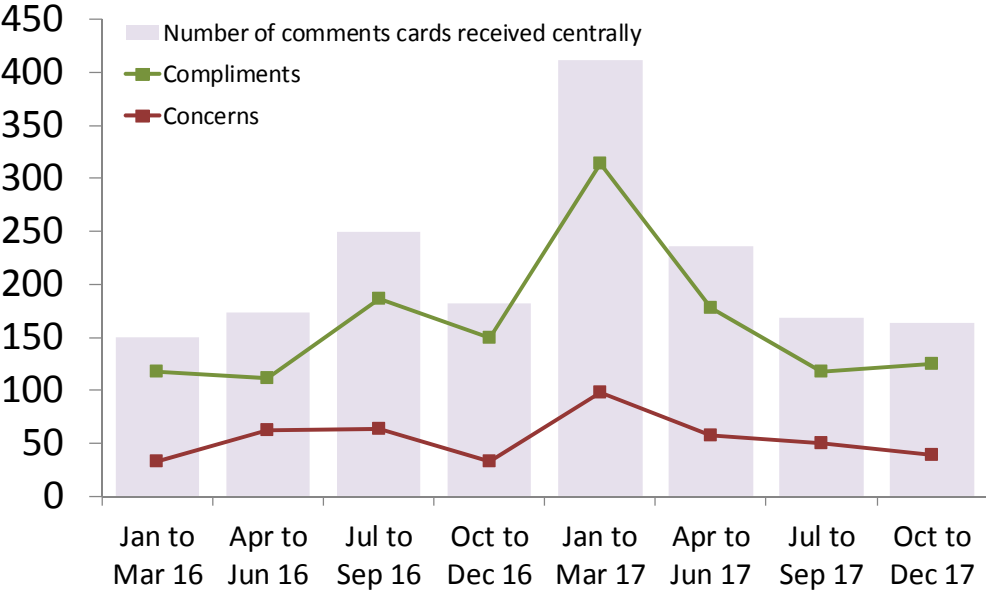
- The Friends and Family Test (FFT) which asks a simple, standardised question with response options on a 5-point scale, ranging from whether they are 'extremely likely' to 'extremely unlikely' to recommend our Trust to their family and friends. The FFT is carried out in inpatient, outpatient, A&E, maternity, 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 October to December 2017, 168 comments cards were completed, of which 311 individual themes have been identified.

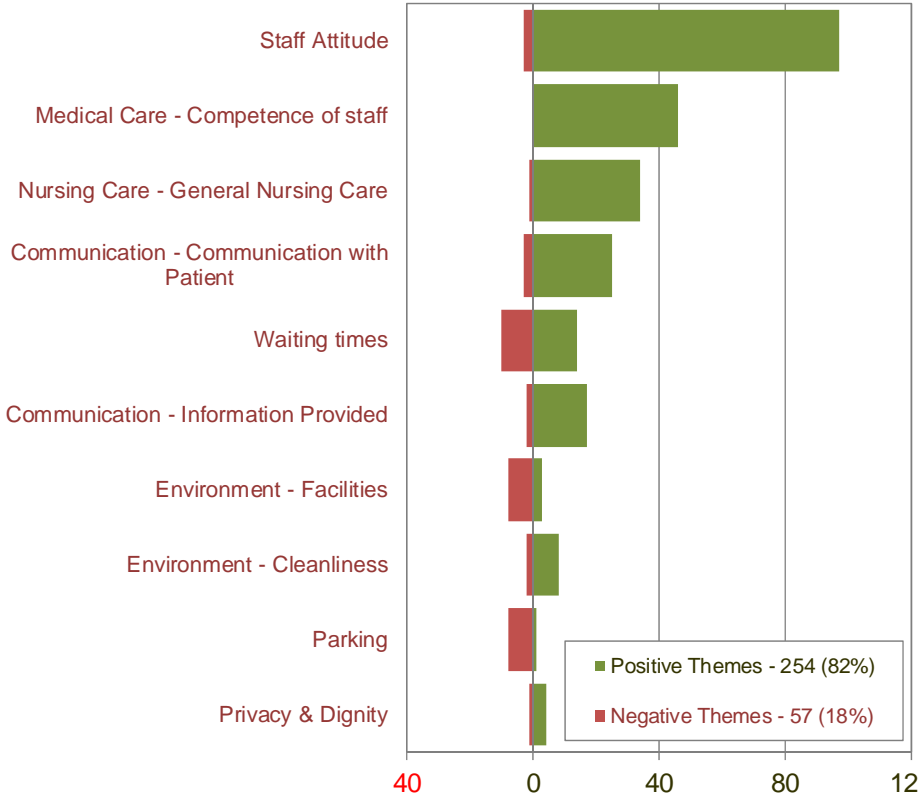


The chart above shows the comments cards received by quarter and the breakdown of these by compliments and concerns. Of all comment cards received this quarter 82% of the themes identified have been positive.

% of positive themes from all comments received centrally			
Current Quarter (Oct to Dec 2017)		Last 12 months (Jan 17 to Dec 17)	
%	QTY	%	QTY
82%	254	81%	1536

% of negative themes from all comments received centrally			
Current Quarter (Oct to Dec 2017)		Last 12 months (Jan 17 to Dec 17)	
%	QTY	%	QTY
18%	57	19%	372

Top 10 themes raised in comment cards between October to December 2017



Receptionist was knowledgeable and friendly.

I was able to get appointments at short notice when I needed them - staff went out of their way to be accommodating.

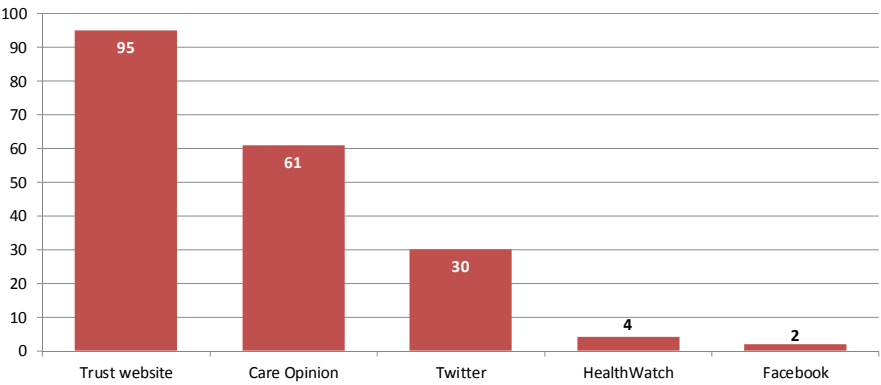
I came for a blood test but due to the lack of parking (none) I had to go home and return the next day early before the car park became congested.

Arrived for appointment on time to find that the appointment had been cancelled without me being told.

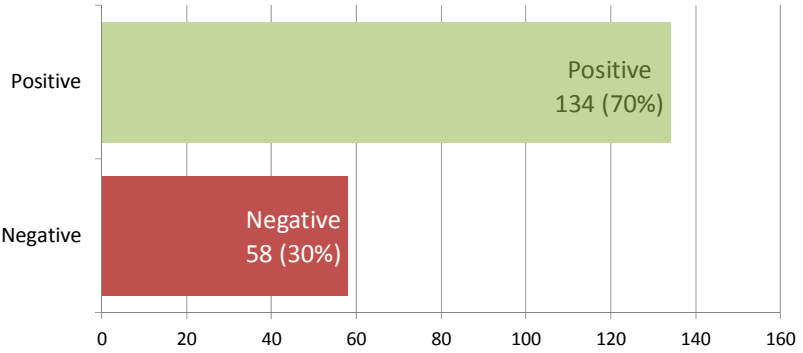
Feedback – Website and social media feedback

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.

The graph below shows that during the past quarter, 192 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 134 positive comments and 58 negative.



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

	Positive	Negative	Positive and negative combined
Staff	43% (139)	13% (13)	35% (152)
General Care	26% (83)	18% (19)	24% (102)
Clinical Treatment	17% (55)	8% (8)	15% (63)
Communication	10% (34)	25% (26)	14% (60)
Environment	2% (7)	25% (26)	8% (33)
Waiting times	2% (6)	11% (11)	4% (17)

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

The staff in the operation theatre couldn't have been more considerate and caring.

Nursing care was variable - nurses seemed to prefer conversation amongst themselves regarding their own social/personal lives than focussing on patients

My mum in law felt safe and said she trusted the nurses and doctors implicitly

The appointments system and organisation of the place needs reviewing urgently.

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:

Jan-Mar 2017	April - Jun 2017	Jul - Sep 2017	Oct-Dec 2017
172	128	135	125

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.

Specialised Cancer

I am writing to express my appreciation for the care and treatment I received at the Northern General earlier this year.

I was referred to the hospital by my GP on {DATE}; within twenty-four hours a scan had revealed a pancreatic tumour which the consultant on call, {CONSULTANT NAME} advised could be removed by surgery. Further scans were arranged in the following week to confirm that there was no evidence that the cancer had spread, and on the {DATE} {CONSULTANT NAME} operated successfully to remove it. I have since undergone a course of chemotherapy at Weston Park which has now completed.

I am extremely grateful for the speed and efficiency with which I was diagnosed and treated, notwithstanding the obvious pressures under which the NHS operates, and I consider myself fortunate to live within the catchment of a centre of such excellence and expertise which was able to respond so quickly.

Respiratory Medicine

I am writing to thank all the staff for the extraordinary level of care I received during my stay in the Northern General last week, from {DATE}.

I had been taken ill with chest pains during the afternoon of the {DATE}, was seen by ambulance paramedics at the conference centre in Sheffield, and then taken by them to A&E at Northern General for treatment.

Everyone who was involved with my care - ambulance crew, the nurses and doctors in A&E and all the wards I spent time in - looked after me so well, blood tests, x-ray, CT scan and then admitted me after consultation with {CONSULTANT NAME} and other members of his team.

I was transferred to the Cystic Fibrosis Unit for 2 nights and here too the care was amazing! Additionally the staff made it possible for my husband to stay with me which made a big difference to us at a time when we were still in shock from the whole emergency and diagnosis of a pulmonary embolism.

At a time when we know the NHS is struggling under the impact of all the cuts I feel so grateful that I was given such wonderful nursing care from all the staff I came into contact with, and would be grateful if you would pass on my heartfelt thanks to everyone concerned.

Medical Imaging and Medical Physics

I was recently referred to the Breast Clinic by my GP.

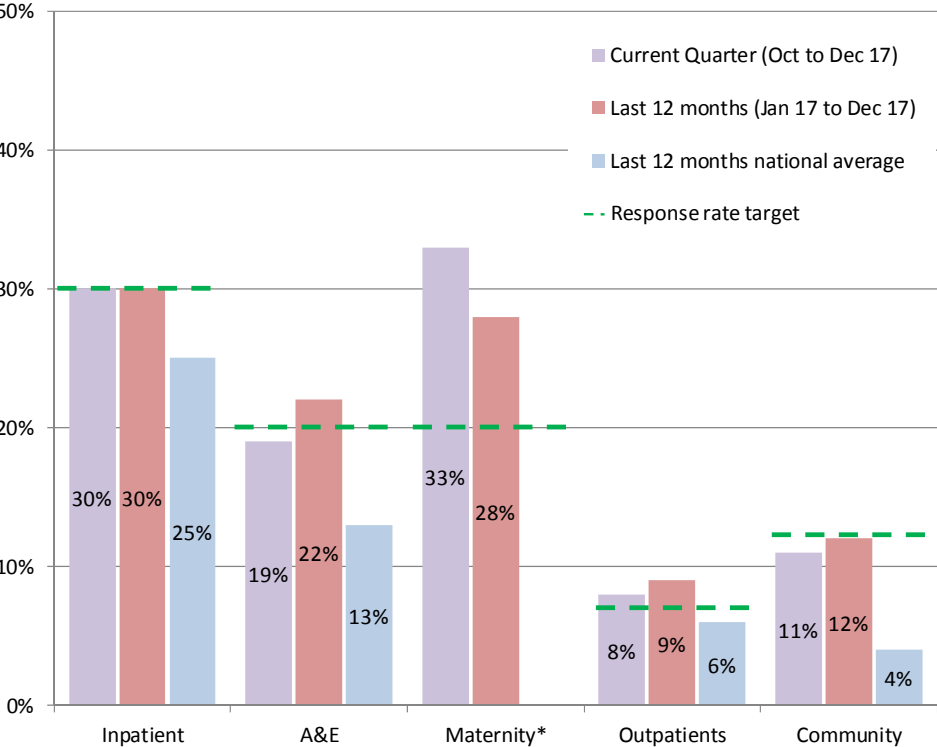
Hospital appointments make me feel very anxious and apprehensive but on the {DATE} when I attended the Clinic everyone was so friendly which went a long way to helping me relax. Also the Clinic was very efficient resulting in little time sitting around waiting for tests.

People can be quick to complain and slow to praise so I just wanted to say a big thank you to all the team.

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.

Friends and Family Test Response rates



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

Between October and December 2017, 9224 inpatients, 4533 A&E patients, 1511 maternity services patients, 17839 outpatients and 2092 community patients from the Trust completed the FFT survey, giving a total of 35199 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.

Following a successful 3 month pilot to cap the number of FFT surveys being sent to outpatients, it has been agreed to keep the cap in place. As a result, the Patient Experience Committee (PEC) has agreed to reduce the outpatient FFT target from 9% to 7%. In addition, following a deep dive into patient experience data for community, the community FFT response rates have been reviewed and due to a number of changes that have taken place in community since the target was originally set, PEC has been agreed to amend the community FFT target from 17% to 12.5%.

For October to December 2017, all areas achieved the internally set response rate targets with the exception of A&E which achieved 19%, below the 20% target, and Community which achieved 11%, below the 12.5% target.

Historically, response rates tend to be lower in December due to the festive period; therefore we would expect response rate to increase during quarter 4.

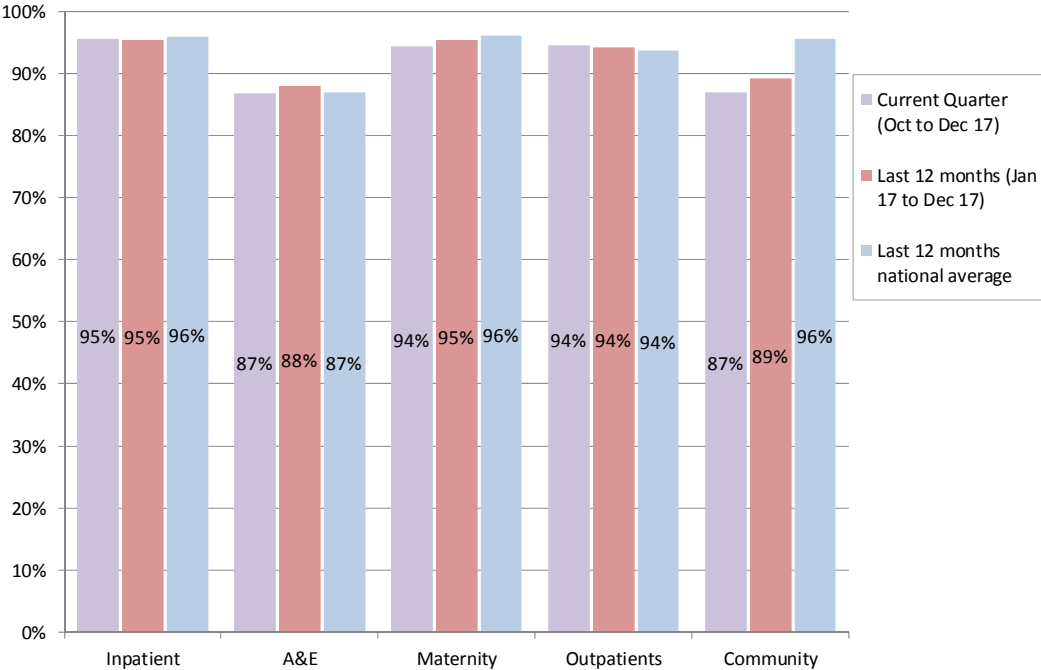
A&E Data Error

Due to a recent change in the coding of ward data in the information services department, the wrong codes were used when running the query for patient eligibility numbers in Eye Casualty. Consequently incorrect eligibility numbers were reported to NHS England in November 2018.

NHS England and Sheffield Clinical Commissioning Group have been informed of this error which affected the overall A&E response rate by 1.7%, whereby it was reported as 19.3% but the correct figure was in fact 17.6%.

Feedback - Friends & Family Test

Friends and Family Test Scores



Each month, the inpatient FFT score is either equal to or slightly below the 12 month national average. Following a review of FFT inpatient wards whose FFT scores were worse than the national average, FFT inpatient scores have seen a slight improvement. The Patient Experience Committee have requested that inpatient areas regularly review their FFT data and identify areas of improvement to increase their ward FFT score.

The percentage of patients who would recommend our Trust in maternity this quarter is 94.3%, lower than the 12 month national average (95.9%) and an decrease of 1.6% from last quarter. Maternity FFT scores continue to be monitored and do fluctuate significantly month by month.

A deep dive has been undertaken and was submitted to the September 2017 Integrated Performance Report into patient experience data for Community. A summary of this deep dive is featured later in this report.

The overall percentage of patients who 'would recommend' our service to friends and family from all 5 elements of the FFT was 93% this quarter, a slight decrease from the 94% 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 A&E (87%) and outpatient (94%) scores are all equal to or higher than the 12 month national average, however the score between October and December 2017 for Inpatient is 0.4% lower than the 12 month national average, maternity is 1.7% lower and Community is 8.5% lower.

Feedback – Local patient satisfaction survey results

The following pages present results from the programme of local patient satisfaction surveys.

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	Jul to Sep 2017	Oct to Dec 2017	12 months combined
INPATIENT SURVEY	Did you always feel safe whilst on the ward?	98%	98%	99% ↑	99%	97% ↓	99% ↑	99%	98%
	Was the ward clean?	99%	98% ↓	99% ↑	99%	98% ↓	98%	99% ↑	99%
	Did you have confidence and trust in hospital staff?	98%	98%	99% ↑	98% ↓	97% ↓	96% ↓	98% ↑	98%
	Did hospital staff treat you with respect and dignity?	99%	99%	99%	99%	99%	98% ↓	98%	99%
	How would you rate your overall experience?	90%	92% ↑	95% ↑	93% ↓	94% ↑	92% ↓	94% ↑	94%
OUTPATIENT SURVEY	Did you get to choose your appointment?	56%	56%	50% ↓	44% ↓	45% ↑	46% ↑	48% ↑	46%
	Is the department easy to find?	95%	95%	96% ↑	95% ↓	96% ↑	97% ↑	94% ↓	96%
	Is it clean?	99%	98% ↓	99% ↑	99%	99%	99%	98% ↓	99%
	Were you seen on time?	76%	71% ↓	76% ↑	74% ↓	78% ↑	76% ↓	72% ↓	74%
	Were you told how long you would have to wait?	55%	57% ↑	56% ↓	38% ↓	42% ↑	28% ↓	36% ↑	37%
	Did clinical staff listen, understand and answer your questions?	94%	95% ↑	96% ↑	95% ↓	94% ↓	96% ↑	95% ↓	95%
	Did you get enough information on any tests or treatment?	93%	93%	94% ↑	94%	93% ↓	94% ↑	92% ↓	93%
	Were you told what would happen next?	96%	96%	98% ↑	97% ↓	95% ↓	96% ↑	95% ↓	96%
	Overall, how would you rate the attitude of the staff in this department?	93%	91% ↓	95% ↑	95%	94% ↓	93% ↓	94% ↑	94%
	Has the main reason you came to the Outpatient Department been dealt with to your satisfaction?	84%	83% ↓	84% ↑	84%	83% ↓	79% ↓	81% ↑	82%
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% ↑	93% ↓	94% ↑	93%
	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%	96% ↑	95% ↓	94%
	I was aware of what the community team were trying to achieve with my treatment/care? e.g. to be mobile and independent at home.	100%	95% ↓	94% ↓	95% ↑	92% ↓	96% ↑	94% ↓	95%
	I was involved with creating your treatment/ care plan	96%	96%	88% ↓	90% ↑	99% ↑	96% ↓	93% ↓	94%
	I was as involved in discussions and decisions about my care, support and treatment as I wanted to be.	96%	95% ↓	91% ↓	92% ↑	95% ↑	94% ↓	95% ↑	94%
	The staff let me know how to contact them if I needed to.	96%	98% ↑	93% ↓	92% ↓	95% ↑	95%	95%	94%
	The appointment/visit times by staff were convenient for me.	98%	98%	98%	96% ↓	98% ↑	96% ↓	99% ↑	97%
	When I had important questions to ask the staff they were answered well.	96%	98% ↑	97% ↓	98% ↑	99% ↑	99%	99%	99%
	I had confidence and trust in the staff treating or supporting me.	100%	88% ↓	98% ↑	97% ↓	100% ↑	99% ↓	99%	98%
	I felt informed of other services that are available to someone in my circumstances, including voluntary organisations.	95%	86% ↓	83% ↓	80% ↓	81% ↑	82% ↑	85% ↑	82%
	I was always involved and informed about decisions to refer me to other services for support.	98%	91% ↓	85% ↓	86% ↑	90% ↑	88% ↓	91% ↑	89%
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% ↓	99%	99%	
I feel less anxious/worried since having this service.	98%	98%	92% ↓	89% ↓	92% ↑	95% ↑	85% ↓	91%	

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 1497 patients were sent the inpatient satisfaction survey. 803 returned a completed survey, giving a response rate of 54%. This compares to a response rate of 47% (702 patients) last quarter.

Key results

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

- 99% (788) of patients said ‘yes, definitely (88%) or ‘yes, to some extent’ (10%) that they ‘always’ felt safe whilst on the ward, compared with 99% last quarter.
- 99% (790) of patients said the ward was ‘very clean’ (80%) or ‘fairly clean’ (19%), compared with 98% last quarter

The lowest scoring question

- 94% (704) of patients rated their overall experience as either ‘Excellent’ (52%), ‘Very good’ (34%) or ‘Good’ (8%), compared with 24% 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 are being 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 communication.

Results from the topic specific questions are presented in the table opposite alongside the results receive for the same quarter last year.

Topic specific questions results – Communication

	October to December 2016	October to December 2017	Variation
Were you given enough time to discuss your condition and treatment with the staff?	90% (310) - 'Yes'	92% (677) - 'Yes'	↑
Were you given enough privacy when discussing your condition or treatment?	97% (328) - 78% - 'Yes, definitely' - 19% - 'Yes, to some extent'	97% (725) - 73% - 'Yes, definitely' - 24% - 'Yes, to some extent'	→
Were you involved as much as you wanted to be in decisions about your care and treatment?	96% (323) - 70% - 'Yes, definitely' - 26% - 'Yes, to some extent'	96% (708) - 70% - 'Yes, definitely' - 26% - 'Yes, to some extent'	→
Have you been given enough information about your condition or treatment?	95% (323) - 69% - 'Yes, definitely' - 26% - 'Yes, to some extent'	94% (695) - 68% - 'Yes, definitely' - 26% - 'Yes, to some extent'	↓
Was the information you were given easy to understand?	96% (322) - 72% - 'Yes, definitely' - 24% - 'Yes, to some extent'	99% (680) - 72% - 'Yes, definitely' - 27% - 'Yes, to some extent'	↑

Next steps

These results will be shared with each individual ward so that local actions can be taken to identify areas of improvement in relation to communication. In addition, these questions will be repeated in a future survey to monitor whether there has been any improvement in performance.

The after service has been excellent as well. Hopefully I am on the road to recovery. Thanks to all of them.

Only negative side to my hospital stay, the bay was very cold, especially at night.

I'm alive today because of the treatment I received and feel better than I've felt for a long time.

Information difficult to understand after brain surgery. Having some written down information would have helped.

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, 13,972 eligible patients were sent the outpatient satisfaction survey. 755 of these patients completed the survey, giving a response rate of 5%. This compares to a response rate of 7% (691 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.

Key results

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

- 98% (722) of the patients that responded stated 'Yes' when asked if the outpatient department was clean, compared with 99% last quarter.
- 95% (679) of the patients that responded stated 'Yes' when asked if they were told what would happen next, compared with 96% last quarter.

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

- Of those who stated that they were not seen on time, 36% (153) of patients that responded stated they were told how long they would have to wait, compared with 28% last quarter.
- 48% (358) of patients that responded stated 'Yes' when asked if they got to choose their appointment, compared with 46% 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.

A pleasant atmosphere and was helpful that the daily appointments coincided with other patients which helped to pass the time and swap experiences.

All information imparted in the 5 minute appointment could easily have been done in a letter in on the phone, or even through one of these online questionnaires.

All my questions have been answered by a very patient and kind Cardiologist that listened to everything I said. The Cardiologist then explained exactly what I can expect from my surgery and asked me if I had any questions.

I would have given top marks if the appointment was not delayed as long as it was.

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. 624 eligible patients were sent the community satisfaction survey, of which 159 patients responded, giving a response rate of 25%. This compares to a response rate of 40% (237 patients) last quarter.

Key results

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

- 99% (148) of patients stated 'Yes, always' (92%) and 'Yes, sometimes' (7%) when asked if they were treated with respect and dignity whilst receiving my care, compared with 99% last quarter.
- 99% (147) of patients stated 'Yes, always' (74%) and 'Yes, sometimes' (24%) when asked if the appointment / visiting times were convenient, compared with 96% last quarter.

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

- 85% (117) of patients responded 'Yes, definitely' (61%) and 'Yes, to some extent' (24%) when asked if they felt less anxious/ worried since having this service, compared with 95% last quarter.
- 85% (107) of patients responded 'Yes, definitely' (50%) and 'Yes, to some extent' (35%) when asked if they felt informed of other services that are available to someone in their circumstances, compared with 82% 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. In addition, the results from this survey were included in the deep dive into patient experience data for Community Services.

All the staff from the doctors down to the porters/nurses are wonderful, they put me at ease.

If only they will answer the phone. Reception is always busy.

I have always had good wonderful treatment by the nurses, physios and all the people who have come to see me.

The number of different carers who visit every day is difficult to cope with, especially for a dementia patient.

Feedback – Carers and Young Carers survey results

Citywide Carer’s Strategy

The Carers and Young Carers survey is part of a wider programme of work to improve the experience of Carers when the person they support is receiving care from the Trust. An action plan has been developed by the Trust in response to the citywide carer’s strategy which uses the following definition to describe a carer:

A carer is someone of any age who provides unpaid support to family or friends to enable them to cope and carry on with their day to day life as they could not manage without this help. This could be caring for a relative, partner or friend who is ill, frail, disabled or suffers with mental ill-health or substance misuse.

Carers and Young Carers Survey

The Carers and Young Carers survey is carried out with Carers whilst they are visiting the person they support in hospital. A team of trained Volunteers visit wards to speak with visitors who are Carers to ask them to complete the survey. The survey was conducted between October and December 2017 and

was completed by 78 Carers and Young Carers. In addition, a further 35 surveys were completed by Carers and Younger Carers who support someone living with Dementia.

Results

The table below presents the percentage of Carers who gave a positive response to each question. Results from Carers who support someone living with Dementia are highlighted in ‘green’ if the score is the same as or more positive than Carers who do not support someone living with dementia and ‘red’ if the score is less positive. This shows that Carers supporting someone living with Dementia gave the same or a more positive score on 18 questions, and a less positive score on 4 questions.

Next steps

These results will be reviewed and actions identified where the experience of Carers and Young Carers could be improved. This will be integrated with the wider Sheffield carers strategy action plan and the survey will be repeated in June 2018.

Question	All Carers	Dementia
Do you identify yourself as a carer? (Yes)	96%	97%
Did you feel that staff recognised you as a carer? (Yes, definitely / Yes, to some extent)	80%	79%
Did staff make you feel welcome? (Yes, definitely / Yes, to some extent)	96%	97%
Were you encouraged to share information about the person you support? (Yes, definitely / Yes, to some extent)	83%	78%
Were you given enough time to talk to staff about the care of the person you support? (Yes, definitely / Yes, to some extent)	83%	85%
Where appropriate, were you given the opportunity to participate with the general care of the person you support? (Yes, definitely / Yes, to some extent)	75%	80%
Were you given enough time to talk about any views or concerns you had? (Yes, definitely / Yes, to some extent)	78%	82%
Whilst the person you support was in hospital, were you given information about how to keep in contact with the hospital? (Yes, definitely / Yes, to some extent)	85%	86%
Did you have confidence and trust in the staff caring for the person you support? (Yes, definitely / Yes, to some extent)	95%	97%
Were you given any information about any support available to carers? (Yes, definitely / Yes, to some extent)	36%	53%
Were you given information about carer’s assessments? (Yes, definitely / Yes, to some extent)	28%	42%
Do you feel you were able to visit when you needed to and for as long as you needed? (Yes, definitely / Yes, to some extent)	93%	97%
If you were in the hospital visiting for long periods of time, were YOU offered any refreshments and encouraged to go for breaks? (Yes, definitely / Yes, to some extent)	63%	76%
Are you satisfied that the environment provides stimulation for the person you support? (Yes, definitely / Yes, to some extent)	54%	44%
Are you satisfied that the environment is safe for the person you support? (Yes, definitely / Yes, to some extent)	97%	97%
If the person you support has learning difficulties, were you asked to present their hospital passport or other communication booklet? (Yes, definitely / Yes, to some extent)	19%	33%
Did you receive a ‘Confusion’ information leaflet? (Yes)	17%	32%
Did you find this leaflet helpful? (Yes, definitely / Yes, to some extent)	73%	77%
Have you or the person you support been provided with a document called ‘All About Me’? (Yes)	13%	23%
Overall, are you satisfied with the support you received as a carer? (Yes, definitely / Yes, to some extent)	83%	87%
Are you satisfied with how much you were included in discharge planning? (Yes, definitely / Yes, to some extent)	75%	57%
Are you satisfied that the discharge plans met the needs of the person you support? (Yes, definitely / Yes, to some extent)	67%	71%

Feedback - 2016 National Accident & Emergency Survey Results

The National Accident and Emergency (A&E) Survey 2016 is the sixth Survey of A&E patients carried out by the Care Quality Commission, and involved 137 acute and specialist NHS trusts with a major accident and emergency department. Previous surveys were carried out in 2003, 2004, 2008, 2012 and 2014.

The survey was carried out on behalf of the Trust by the Picker Institute and the survey was sent to a total of 1182 eligible patients who attended A&E during September 2016. 287 patients returned the completed questionnaire, giving a response rate of 24%. Nationally, the Care Quality Commission received 45,597 responses from patients, giving a national response rate of 27%.

Performance compared to other Trusts

Compared to other trusts participating in the survey, Sheffield Teaching Hospitals NHS Foundation Trust scored significantly better on 1 question, significantly worse on 2 questions, and scored average on 32 questions. The question where this Trust scored significantly better or worse than other trusts are as follows:

Question where the Trust scored significantly better than other trusts

Question	STH	National Average
Leaving: not told who to contact if worried	8.2 / 10	7.7 / 10

Questions where the Trust scored significantly worse than other trusts

Question	STH	National Average
Waiting: waited more than 15 minutes before speaking to doctor or nurse	2.2 / 10	3.9 / 10
Hospital: felt threatened by other patients or visitors	8.8 / 10	9.3 / 10

Performance compared to previous surveys

Scoring in the Care Quality Commission National Accident and Emergency Survey is based on the individual 'multiple choice' response options being converted into scores on a scale from 0 to 10. A score of 10 represents the best possible response and a score of zero the worst. The higher the score for each question, the better the Trust is performing.

In 2016, the Trust scored significantly better on 3 questions compared to 2014, scored significantly worse on 3 questions, and there was no significant difference on 29 questions. The question where this Trust scored significantly better or worse than in 2014 are as follows:

Question where the Trust scored significantly better than in 2014

Question	2012	2014	2016
Doctors/nurses: did not fully listen to patient	7.5 / 10	7.8 / 10	8.5 / 10
Care: wanted to be more involved in decisions	6.2 / 10	6.6 / 10	7.4 / 10
Leaving: not told who to contact if worried	6.7 / 10	7.3 / 10	8.2 / 10

Questions where the Trust scored significantly worse than in 2014

Question	2012	2014	2016
Ambulance: waited more than 30 minutes for care to be handed over to the emergency department staff	9.6 / 10	9.7 / 10	8.9 / 10
Waiting: waited more than 15 minutes before speaking to doctor or nurse	4.2 / 10	3.9 / 10	2.2 / 10
Waiting: had to wait more than 2 hours to be examined	9.0 / 10	9.2 / 10	8.6 / 10

Improving the experience of patients

Survey results and comments were shared with the A&E directorate who are considering the results alongside other patient experience data, in order to agree an action plan.

Community Services Deep Dive

In September 2017, a deep dive report was submitted as part of the Integrated Performance Report providing a comprehensive overview of all patient experience feedback which relates to community services.

There are a wide range of different methods used to collect patient views on their experience of receiving care delivered by the Trust and the reported explained that it is more difficult to compare national patient experience data for Community Services than areas such as Inpatients and A&E as each trust will have a different range of services within community. Community Services provided by this Trust are extensive whereas other community trusts may only run a small number of services.

Data review

The first section of the report provided an overview of findings following a thorough and detailed review of all patient feedback which relates to community services. The key findings were:

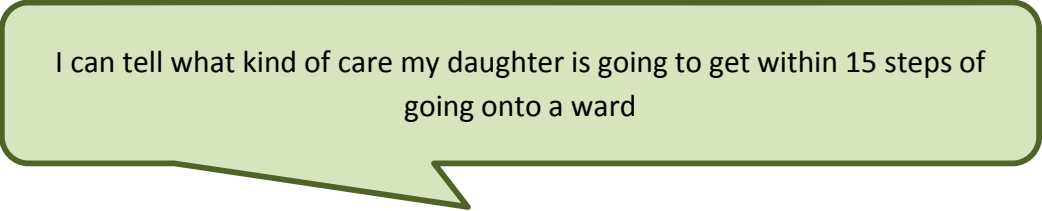
- Friends and Family Test (FFT) 12 month response rate was 15% for community, significantly higher than the national 12 month response rate of 4%
- The 12 month FFT positive score was 88.7%, lower than the 95.3% 12 month national score, and the negative score for the same period is 3.7%, significantly higher than the 1.4% 12 month national negative score.
- Although still high, through close monitoring by the Patient Experience Committee and each service reviewing their FFT scores on an ongoing basis, there has been a reduction in the negative score over the previous 18 month period.
- From the 351 FFT negative responses, 182 free-text comments were received. This compares with 6855 free-text comments from positive FFT responses for community.
- Upon closer review, 13% of all comments which relate to a negative FFT rating were potentially incorrectly recorded as negative (by the patient) instead of positive or did not relate to the services that the patient was being asked to comment on. It is only possible to undertake this review on ratings where a comment has been left, therefore there are an additional 169 negative ratings (48%) where it is not possible to determine whether the rating actually reflects the experience of the patient.

- When formal complaints and informal concerns are combined, a total of 75 concerns have been received for community based services over the 12 month review period. This equates to just 0.09% of community patients raising a concern and accounts for 2% of all formal complaints and informal concerns received across the Trust during this period.
- The local community satisfaction survey scores show that results vary from quarter to quarter, but overall most results are above 90% and a total of 119 free text comments were received during the 12 month review period, of these 61% (72) were positive and 31% (37) negative, with 8% (10) being neutral.

Community Services are very active in seeking views and conducting in-depth patient experience surveys and interviews to ensure they have a full picture of how patients view their services. Examples of local initiatives were featured in the deep dive report, one of which is detailed below:

15 Step Challenge

The 15 Step Challenge has been implemented across Community Services over the past three years. The 15 Step Challenge is a tool kit which considers first impressions through the eyes of the patient and was first developed by the NHS Institute for Innovation and Improvement in response to the following quote from a mother:



I can tell what kind of care my daughter is going to get within 15 steps of going onto a ward

By undertaking the 15 Step Challenge, Community Services have been able to consider how a service that provides care in the patient's own home versus a hospital setting promotes a good impression and inspires confidence. Investment in the 15 Step Challenge has encouraged Community Services to pause for a moment and undertake a unique style of enquiry. This has provided patients with a 'voice' and given staff the opportunity to listen and appreciate what practice and simple gestures help patients feel safe, valued and cared for.

Community Services Deep Dive

Both the community and acute version of the toolkit have been used with the following lines of enquiry:

- Community Version** - Well Prepared, Safe and Cared For, Involved in Care, Communication
- Acute Version** – Welcoming, Safe, Caring and Involving, Well Organised and Calm

One outcome of this work is the creation of a short video ‘**Community Services – Care through our Patients Eyes**’ which was created to share the feedback generated from patient interviews undertaken as part of the 15 Step Challenge. The video was created to:

- Convey a big ‘THANKYOU’ to Community Services staff
- Share patient feedback and share good practice
- Boost staff morale
- Serve as a subtle reminder of the ‘simple gestures’ that can help care feel more personal and patients feel more valued.

The video can be viewed by following this link:
<file:///sth/Systems/Intranet/Video/CommunityCareThroughPatientsEyes.mp4>

Services within the Combined Community and Acute Care Group which have undertaken the 15 Step Challenge include:

2014/2015	2015/2016	2016/2017
<ul style="list-style-type: none"> • Beech Hill • Assessment Rehabilitation Centre • GP Collaborative • Podiatric Surgery 	<ul style="list-style-type: none"> • Dietetics • Tissue Viability • Lymphoedema • Active Programmes 	<ul style="list-style-type: none"> • Palliative Care Unit • Brearley 5 • Active Recovery • Community Nursing

Community services are also very pro active at using patient feedback to improve services, examples of these were included in the deep dive report, one of which is detailed below:

Remote blood pressure readings

A Community Matron found that every time Community Nursing staff visited a particular patient to take their blood pressure, the reading came out high and the patient displayed levels of anxiety about having their blood pressure taken. The matron questioned if this patient may possibly benefit from taking their own readings to ease their anxiety. The patient was given a demonstration on how to use the blood pressure machine and how to text the reading back to the team. The patient was given an information leaflet and signed the consent form to trial this. Once the patient began using this system, their blood pressure readings lowered. Using this system has enabled more accurate blood pressure monitoring, reduced staff face to face visits and empowered the patient. The team are now identifying a process for rolling this out to more patients.

Summary

The paper demonstrates that there is a great deal of good practice that is currently being undertaken within Community Services by using patient feedback, engaging with the people who use their services and using this to influence and shape change.

This deep dive report provided the Board with assurance that patient experience data in Community Services is well managed and that performance will continue to be monitored with further improvements being sought.