



Report Cover Sheet

Report to:	Quality Committee	
	July 2020	
Agenda Item:	P1-117-20	
Title:	2019 Adult Patient Survey Results	
Report prepared by:	Karen Kay – Deputy Director of Nursing	
Executive Lead:	Sheila Lloyd - Director of Nursing and Quality	
Status of the Report:	Public	Private
		x

Paper previously considered by:	Integrated Governance Committee 13 th July 2020
Date & Decision:	Noted

Executive summary/key points for discussion:	<p>Clatterbridge Cancer Centre (CCC) has been voted one of England's top hospitals for inpatients in the latest adult inpatient experience survey. The trust is the highest scoring cancer hospital in the North West and one of only seven trusts in England to be rated "consistently" well above average after also achieving the same rating last year.</p> <p>The Adult Inpatient Survey Results 2019 were released on 2nd July 2020 following a period of embargo. Clatterbridge Cancer Centre was identified as performing "much better than the majority of the hospitals across the country".</p> <p>The CCC overall patient experience score achieved was 8.9 (8.8 in 2018), which was equal to the highest score nationally for Cancer Centres.</p> <p>CCC was highlighted as one of the best performing trusts in England across 9 out of 12 sections of the report and the same as the majority of trusts in 1 section. The two remaining sections were not applicable.</p> <p>Section scores were not shown with fewer than 30 respondents.</p>
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Action Required:	Discuss		Receive	x
	Approve		Note	x

Next steps:	<p>The Integrated Governance Committee are requested to:</p> <ul style="list-style-type: none"> Note the content of the report and progress to date Request further updates as required
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The paper links to the following strategic priorities (please tick)

Deliver outstanding care locally	x	Collaborative system leadership to deliver better patient care	x
Retain and develop outstanding staff		Be enterprising	
Invest in research & innovation to deliver excellent patient care in the future		Maintain excellent quality, operational and financial performance	x

The paper relates to the following Board Assurance Framework (BAF) Risks

BAF Risk	Please Tick
1. If we do not optimise quality outcomes we will not be able to provide outstanding care	x
2. If we do not prioritise the costs of the delivering the Transforming Cancer Care Programme we will not be able to maintain our long-term financial strength and make appropriate strategic investments.	
3. If we do not have the right infrastructure (estate, communication & engagement, information and technology) we will be unable to deliver care close to home.	
4. If we do not have the right innovative workforce solutions including education and development, we will not have the right skills, in the right place, at the right time to deliver the outstanding care.	x
5. If we do not have an organisational culture that promotes positive staff engagement and excellent health and well-being we will not be able to retain and attract the right workforce.	x
6. If we fail to implement and optimise digital technology we will not deliver optimal patient outcomes and operational effectiveness.	
7. If we fail to position the organisation as a credible research partner we will limit patient access to clinical trials and affect our reputation as a specialist centre delivering excellent patient care in the future.	
8. If we do not retain system-side leadership, for example, SRO for Cancer Alliance and influence the National Cancer Policy, we will not have the right influence on the strategic direction to deliver outstanding cancer services for the population of Cheshire & Merseyside.	x
9. If we do not support and invest in entrepreneurial ideas and adapt to changes in national priorities and market conditions we will stifle innovative cancer services for the future.	
10. If we do not continually support, lead and prioritise improved quality, operational and financial performance, we will not provide safe, efficient and effective cancer services.	x

Equality & Diversity Impact Assessment		
Are there concerns that the policy/service could have an adverse impact on:	YES	NO
Age		x
Disability		x
Gender		x
Race		x
Sexual Orientation		x
Gender Reassignment		x
Religion/Belief		x
Pregnancy and Maternity		x

If YES to one or more of the above please add further detail and identify if a full impact assessment is required.

Patient survey report 2019

Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

NHS Patient Survey Programme

Adult Inpatient Survey 2019

Care Quality Commission

The Care Quality Commission (CQC) is the independent regulator of health and adult social care in England. We make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve. Our role is to register care providers, and to monitor, inspect and rate services. If a service needs to improve, we take action to make sure this happens. We speak with an independent voice, publishing regional and national views of the major quality issues in health and social care.

Adult Inpatient Survey 2019

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

The 2019 survey of adult inpatients (the seventeenth iteration of the survey) involved 143 acute and specialist NHS trusts. 76,915 people responded to the survey, yielding an adjusted response rate of 45%.

Patients were eligible for the survey if they were aged 16 years or older, had spent at least one night in hospital and were not admitted to maternity or psychiatric units. Trusts sampled patients discharged during July 2019¹. Trusts counted back from the last day of July 2019, including every consecutive discharge, until they had selected 1,250 patients (or, for a small number of specialist trusts who could not reach the required sample size, until they had reached 1st January 2019). Fieldwork took place between August 2019 and January 2020.

Surveys of adult inpatients were also carried out in 2002 and annually from 2004 to 2018. Although questionnaire redevelopments took place over the years, the survey results for this year are largely comparable to those from previous iterations.

The Adult Inpatient Survey is part of a wider programme of NHS patient surveys which covers a range of topics, including children and young people's services, community mental health services, urgent and emergency care services and maternity services. To find out more about the programme and to see the results from previous surveys, please see the links in the 'Further information' section.

CQC will use the results from the survey in the regulation, monitoring and inspection of NHS acute trusts in England. We will use data from the survey in our system of CQC Insight, which provides inspectors with an assessment of performance in areas of care within an NHS trust that need to be followed up. Survey data will also be used to support CQC inspections. NHS England and NHS Improvement will use the results to check progress and improvement against the objectives set out in the NHS mandate, and the Department of Health and Social Care will hold providers to account for the outcomes they achieve.

This research was carried out in accordance with the international standard for organisations conducting social research (accreditation to ISO20252:2012; certificate number GB08/74322).

Interpreting the report

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

¹31 trusts sampled additional months because of small patient throughputs.

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

Standardisation

People's characteristics, such as age and gender, can influence their experience of care and the way they report it. For example, research shows that men tend to report more positive experiences than women, and older people more so than younger people. Since trusts have differing profiles of people who use their services, this could potentially affect their results and make trust comparisons difficult. A trust's results could appear better or worse than if they had a slightly different profile of patients.

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

Scoring

For each question in the survey, the individual (standardised) responses are converted into scores on a scale from 0 to 10. A score of 10 represents the best possible response and a score of 0 the worst. The higher the score for each question, the better the trust is performing.

It is not appropriate to score all the questions in the questionnaire. For example, some questions are descriptive, such as Q1, which asks respondents if their inpatient stay was planned or an emergency. Other questions are 'routing questions', which are designed to filter out respondents to whom the following questions do not apply. An example of a routing question is Q44 "During your stay in hospital, did you have an operation or procedure?". For full details of question scoring please see the technical document (see 'Further information' section).

Section scoring is computed as the arithmetic mean of question scores for the section after weighting is applied.

Graphs

The graphs in this report show how the score for the trust compares to the range of scores achieved by all trusts taking part in the survey. The black diamond shows the score for your trust. The graph is divided into three sections:

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

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

Methodology

The 'about the same,' 'better' and 'worse' categories are based on an analysis technique called the '**expected range**' which determines the range within which the trust's score could fall without differing significantly from the average, taking into account the number of respondents for each trust

and the scores for all other trusts. If the trust's performance is outside of this range, it means that it performs significantly above or below what would be expected. If it is within this range, we say that its performance is 'about the same'. Where a trust is identified as performing 'better' or 'worse' than the majority of other trusts, the result is unlikely to have occurred by chance.

In some cases, there will be no orange and / or no green area in the graph. This happens when the expected range for your trust is so broad it encompasses either the highest possible score for all trusts (no green section) or the lowest possible score for all trusts (no orange section). This could be because there were few respondents and / or a lot of variation in their answers.

Please note that if fewer than 30 respondents have answered a question, no score will be displayed for this question (and the corresponding section the question contributes to²). This is because the uncertainty around the result is too great.

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

Tables

At the end of the report you will find tables containing the data used to create the graphs, the response rate for your trust and background information about the people that responded.

Scores from last year's survey are also displayed where available. The column called 'Change from 2018' uses arrows to indicate whether the score for this year shows a statistically significant increase (up arrow), a statistically significant decrease (down arrow) or has shown no statistically significant change (no arrow) compared with 2018. A statistically significant difference means that the change in the result is very unlikely to have occurred by chance. Significance is tested using a two-sample t-test with a significance level of 0.05.

Please note that comparative data is not shown for sections as the questions contained in each section can change year on year.

Where a result for 2018 is not shown, this is either because the question was new this year, or the question wording and / or the response categories have been changed. Where the question wording or response options were modified, it is not possible to compare the results because any score change could be caused by alterations in the survey instrument, rather than variation in a trust's performance.

Comparisons are also not able to be shown if a trust has merged with other trusts since the 2018 survey, or if a trust committed a sampling error in 2018.

Notes on specific questions

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

All trusts

Q50 and Q51: The information collected by Q50 "On the day you left hospital, was your discharge delayed for any reason?" and Q51 "What was the main reason for the delay?" are presented together to show whether a patient's discharge was delayed by reasons attributable to the hospital.

The combined question in this report is labelled as Q51 and is worded as: "Discharge delayed due to wait for medicines/to see doctor/hospital transport."

Q52: Information from Q50 and Q51 has been used to score Q52 "How long was the delay?" This assesses the length of a delay to discharge for reasons attributable to the hospital.

Q53 and Q56: Respondents who answered Q53 "Where did you go after leaving hospital?" with "I was transferred to another hospital" were excluded from the scoring of Q56 ("Before you left

²The section score is not displayed as it would include fewer questions compared with other trusts.

hospital, were you given any written or printed information about what you should or should not do after leaving hospital?”).

Trusts with female patients only

Q11: If your trust offers services to women only, the score for Q11 “While in hospital, did you ever share a sleeping area, for example a room or bay, with patients of the opposite sex?” is not shown.

Trusts without an A&E department

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

Notes on question comparability

The following questions do not have historical comparisons because they were substantially modified for the 2019 questionnaire:

Q51: “What was the main reason for the delay”, where the third response option was modified from “I had to wait for an ambulance” to “I had to wait for hospital transport”.

Q66: “After being discharged, was the care and support you expected available when you needed it?” where the stem “after being discharged” was added.

For more information on questionnaire redevelopment and the reasons for modifying questions please see the Survey Development Report, available here:

<https://nhssurveys.org/wp-content/surveys/02-adults-inpatients/01-design-development/2019/Survey%20development%20report.pdf>

Further information

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

<https://www.cqc.org.uk/inpatientsurvey>

The results for the adult inpatient surveys from 2015 to 2018 can be found at:

<https://nhssurveys.org/data-library/>

Full details of the methodology for the survey, including questionnaires, letters sent to patients, instructions for trusts and contractors to carry out the survey, and the survey development report, are available at:

<https://nhssurveys.org/surveys/survey/02-adults-inpatients/>

More information on the NHS Patient Survey Programme, including results from other surveys and a schedule of current and forthcoming surveys can be found at:

<https://www.cqc.org.uk/content/surveys>

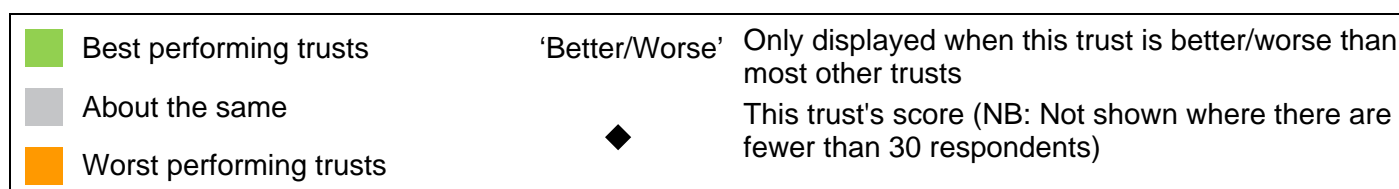
More information about how CQC monitors hospitals is available on the CQC website at:

<https://www.cqc.org.uk/what-we-do/how-we-use-information/monitoring-nhs-acute-hospitals>

Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

Section scores

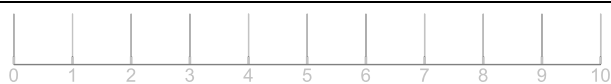


Adult Inpatient Survey 2019

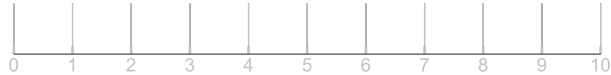
The Clatterbridge Cancer Centre NHS Foundation Trust

The Accident & Emergency Department (answered by emergency patients only)

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

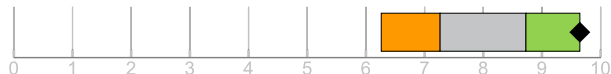


Q4. Were you given enough privacy when being examined or treated in the A&E Department?



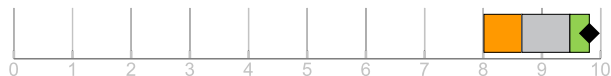
Waiting list or planned admissions (answered by those referred to hospital)

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



Better

Q7. Was your admission date changed by the hospital?



Better

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



Better

Waiting to get to a bed on a ward

Q9. From the time you arrived at the hospital, did you feel that you had to wait a long time to get to a bed on a ward?



Better

■ Best performing trusts

■ About the same

■ Worst performing trusts

‘Better/Worse’

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

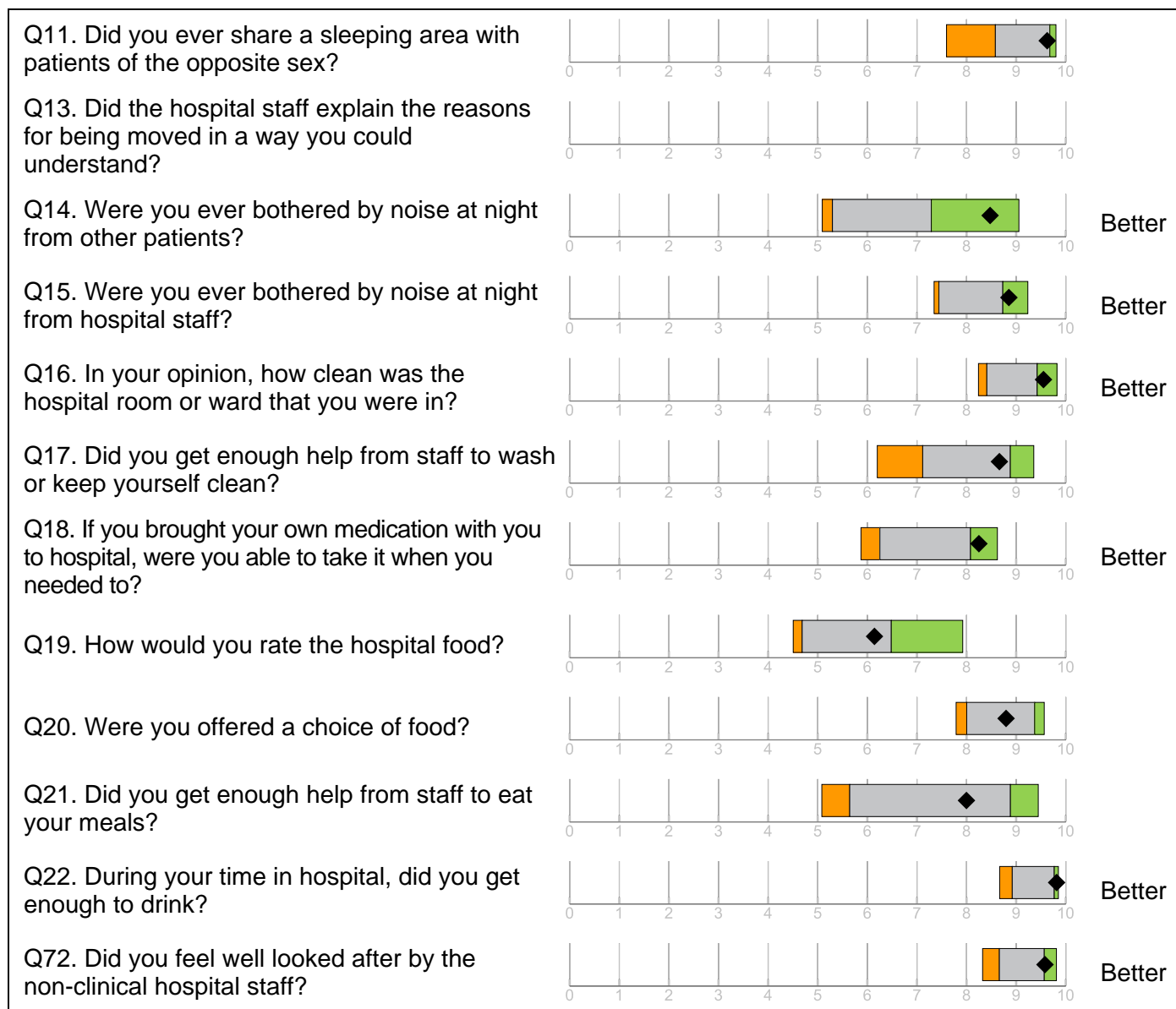


This trust's score (NB: Not shown where there are fewer than 30 respondents)

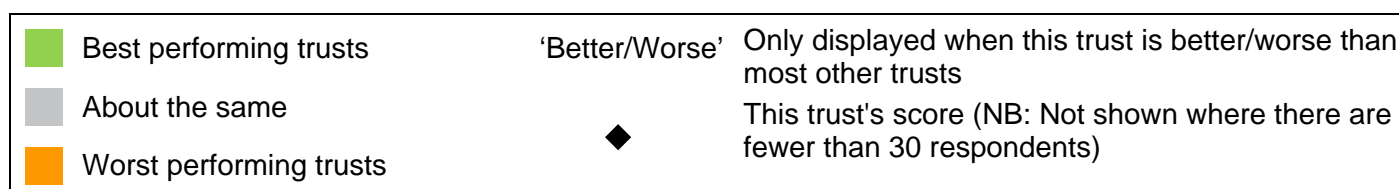
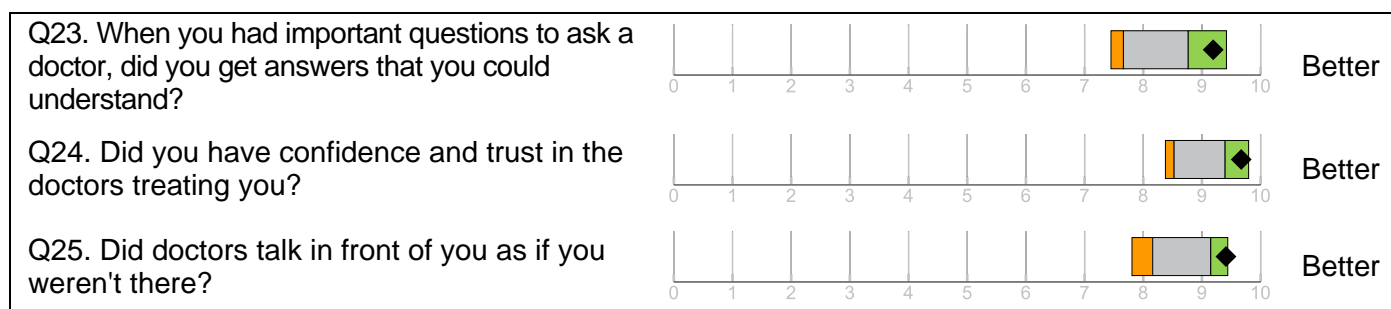
Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

The hospital and ward



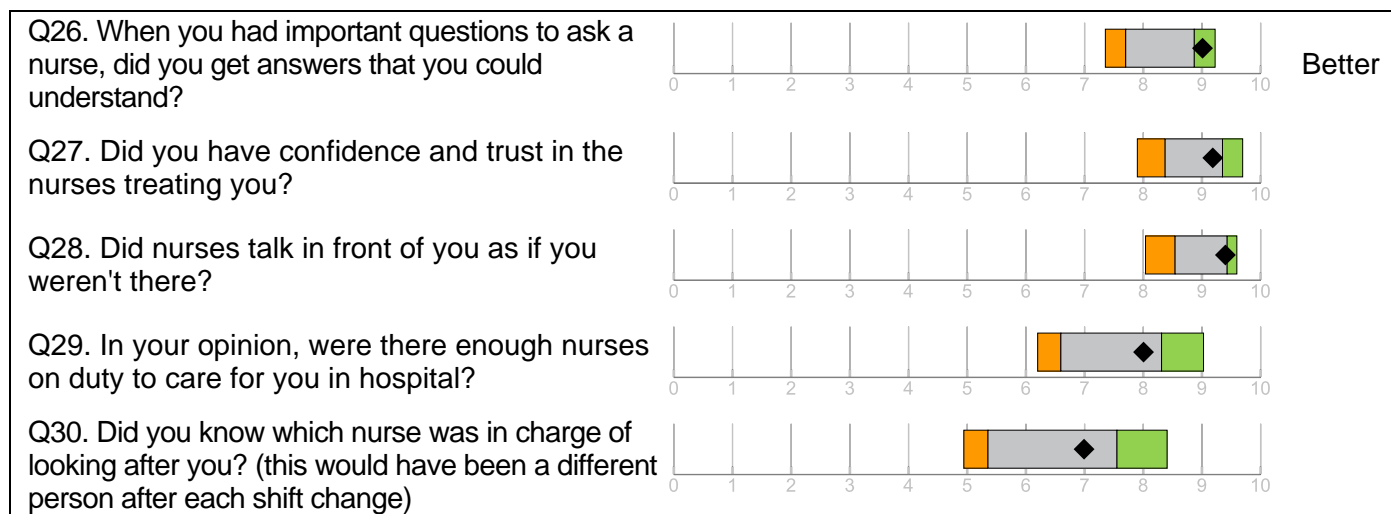
Doctors



Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

Nurses

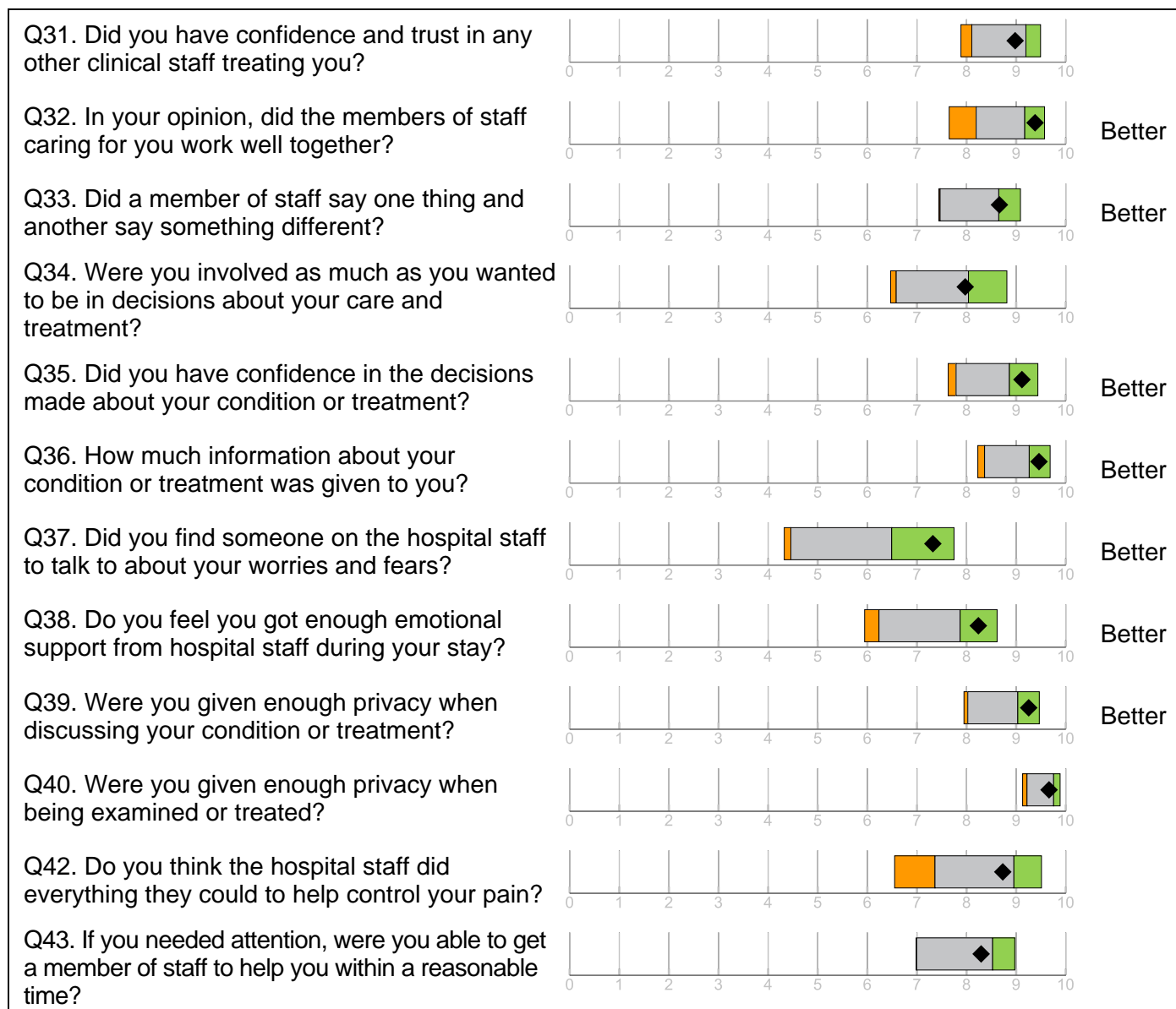


■	Best performing trusts	‘Better/Worse’	Only displayed when this trust is better/worse than most other trusts
■	About the same		This trust's score (NB: Not shown where there are fewer than 30 respondents)
■	Worst performing trusts		
		◆	

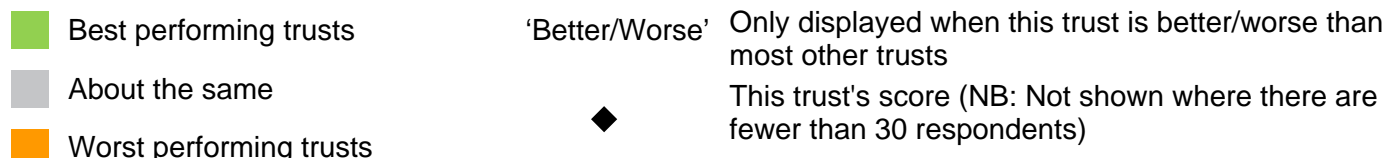
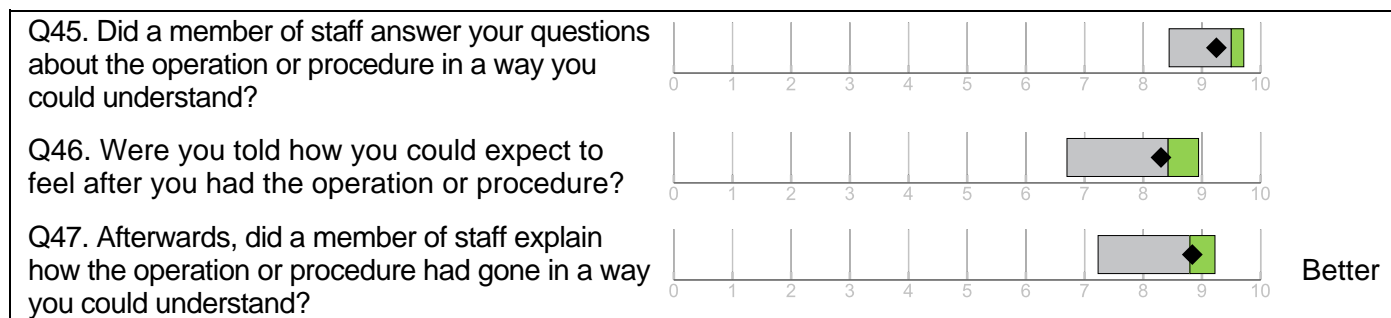
Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

Your care and treatment



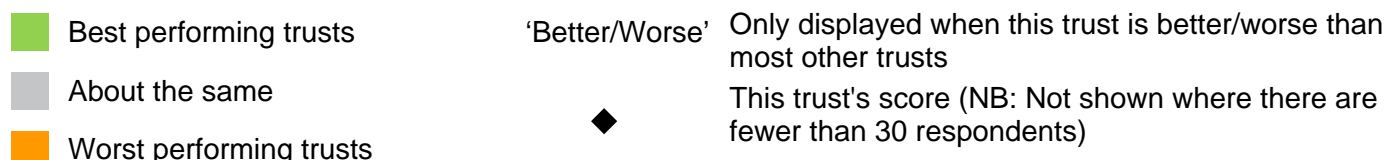
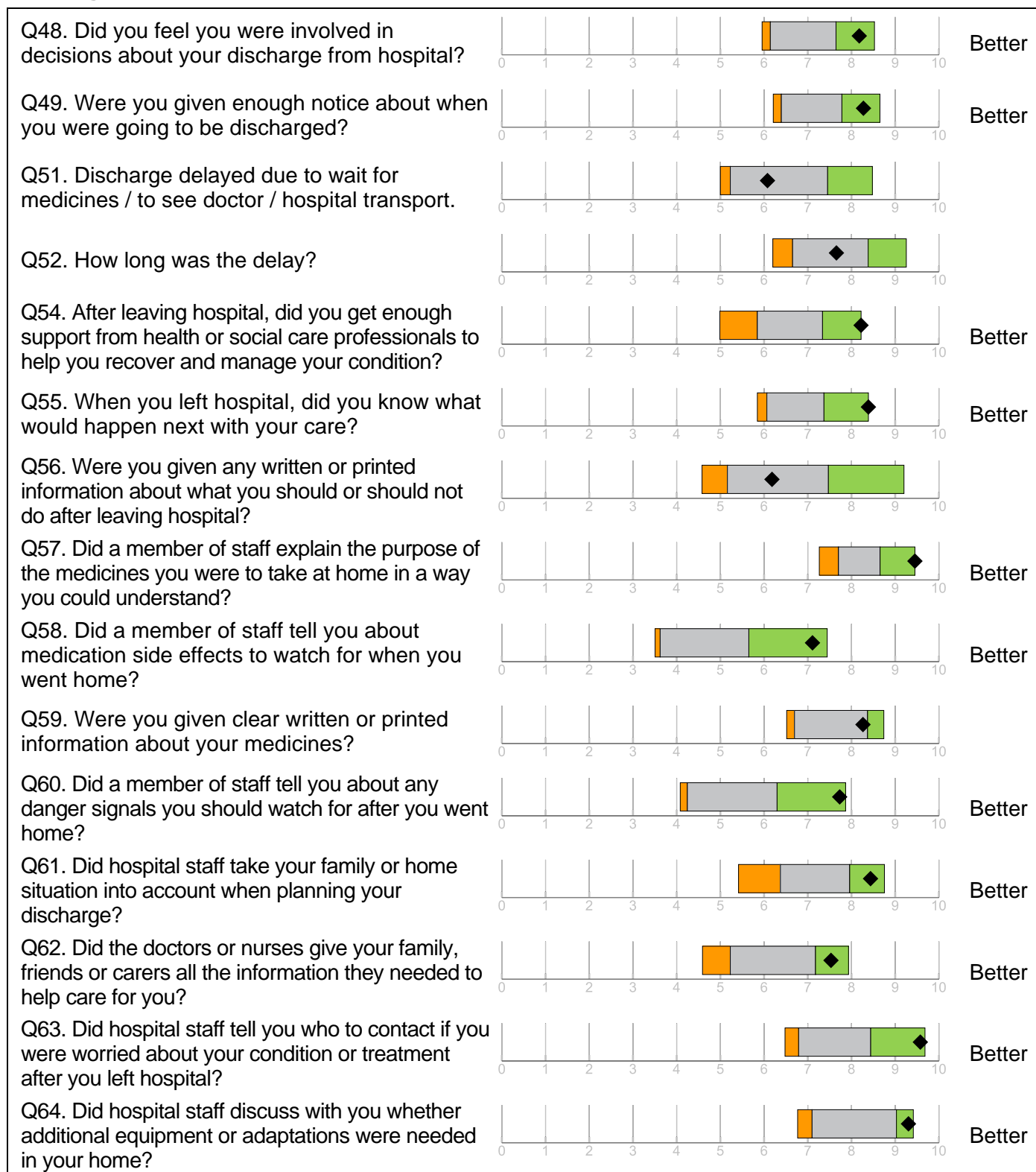
Operations and procedures (answered by patients who had an operation or procedure)



Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

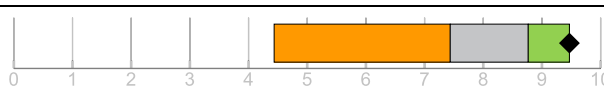
Leaving hospital



Adult Inpatient Survey 2019

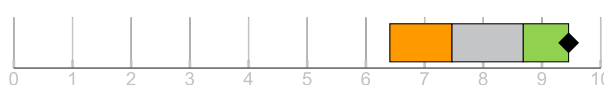
The Clatterbridge Cancer Centre NHS Foundation Trust

Q65. Did hospital staff discuss with you whether you may need any further health or social care services after leaving hospital?



Better

Q66. After being discharged, was the care and support you expected available when you needed it?



Better

Feedback on care and research participation

Q69. During this hospital stay, did anyone discuss with you whether you would like to take part in a research study?



Q70. During your hospital stay, were you ever asked to give your views on the quality of your care?



Q71. Did you see, or were you given, any information explaining how to complain to the hospital about the care you received?



Better

Respect and dignity

Q67. Overall, did you feel you were treated with respect and dignity while you were in the hospital?



Overall experience

Q68. Overall...



Better

Best performing trusts

About the same

Worst performing trusts

'Better/Worse'



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

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

Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

		Scores for this NHS trust	Lowest trust score in England	Highest trust score in England	Number of respondents (this trust)	2018 scores for this NHS trust	Change from 2018
The Accident & Emergency Department (answered by emergency patients only)							
S1	Section score	-	7.6	9.0			
Q3	While you were in the A&E Department, how much information about your condition or treatment was given to you?	-	6.8	9.0			
Q4	Were you given enough privacy when being examined or treated in the A&E Department?	-	7.8	9.5			
Waiting list or planned admissions (answered by those referred to hospital)							
S2	Section score	9.6	7.7	9.6			
Q6	How do you feel about the length of time you were on the waiting list?	9.6	6.3	9.6	130	9.7	
Q7	Was your admission date changed by the hospital?	9.8	8.0	9.8	132	9.9	
Q8	Had the hospital specialist been given all necessary information about your condition/illness from the person who referred you?	9.5	8.2	9.5	133	9.5	
Waiting to get to a bed on a ward							
S3	Section score	9.3	5.8	9.3			
Q9	From the time you arrived at the hospital, did you feel that you had to wait a long time to get to a bed on a ward?	9.3	5.8	9.3	188	8.9	

↑ or ↓

Indicates where 2019 score is significantly higher or lower than 2018 score
(NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2018 data is available.

Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

	Scores for this NHS trust	Lowest trust score in England	Highest trust score in England	Number of respondents (this trust)	2018 scores for this NHS trust	Change from 2018
The hospital and ward						
S4 Section score	-	7.3	9.0			
Q11 Did you ever share a sleeping area with patients of the opposite sex?	9.6	7.6	9.8	189	9.4	
Q13 Did the hospital staff explain the reasons for being moved in a way you could understand?	-	5.3	8.7		8.1	
Q14 Were you ever bothered by noise at night from other patients?	8.5	5.1	9.1	188	7.7	↑
Q15 Were you ever bothered by noise at night from hospital staff?	8.9	7.3	9.2	188	8.5	
Q16 In your opinion, how clean was the hospital room or ward that you were in?	9.6	8.2	9.8	188	9.4	
Q17 Did you get enough help from staff to wash or keep yourself clean?	8.7	6.2	9.4	85	8.8	
Q18 If you brought your own medication with you to hospital, were you able to take it when you needed to?	8.2	5.9	8.6	113	8.0	
Q19 How would you rate the hospital food?	6.1	4.5	7.9	175	6.1	
Q20 Were you offered a choice of food?	8.8	7.8	9.6	187	9.2	
Q21 Did you get enough help from staff to eat your meals?	8.0	5.1	9.4	30	8.8	
Q22 During your time in hospital, did you get enough to drink?	9.8	8.7	9.9	183	9.8	
Q72 Did you feel well looked after by the non-clinical hospital staff?	9.6	8.3	9.8	183	9.6	
Doctors						
S5 Section score	9.4	8.1	9.5			
Q23 When you had important questions to ask a doctor, did you get answers that you could understand?	9.2	7.4	9.4	177	9.0	
Q24 Did you have confidence and trust in the doctors treating you?	9.7	8.4	9.8	189	9.5	
Q25 Did doctors talk in front of you as if you weren't there?	9.4	7.8	9.4	189	9.3	

↑ or ↓

Indicates where 2019 score is significantly higher or lower than 2018 score
(NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2018 data is available.

Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

	Scores for this NHS trust	Lowest trust score in England	Highest trust score in England	Number of respondents (this trust)	2018 scores for this NHS trust	Change from 2018
Nurses						
S6 Section score	8.5	7.3	9.1			
Q26 When you had important questions to ask a nurse, did you get answers that you could understand?	9.0	7.4	9.2	177	9.1	
Q27 Did you have confidence and trust in the nurses treating you?	9.2	7.9	9.7	190	9.4	
Q28 Did nurses talk in front of you as if you weren't there?	9.4	8.0	9.6	190	9.5	
Q29 In your opinion, were there enough nurses on duty to care for you in hospital?	8.0	6.2	9.0	190	8.4	
Q30 Did you know which nurse was in charge of looking after you? (this would have been a different person after each shift change)	7.0	4.9	8.4	189	7.4	

↑ or ↓

Indicates where 2019 score is significantly higher or lower than 2018 score
(NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2018 data is available.

Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

	Scores for this NHS trust	Lowest trust score in England	Highest trust score in England	Number of respondents (this trust)	2018 scores for this NHS trust	Change from 2018
Your care and treatment						
S7 Section score	8.8	7.4	9.1			
Q31 Did you have confidence and trust in any other clinical staff treating you?	9.0	7.9	9.5	121	9.2	
Q32 In your opinion, did the members of staff caring for you work well together?	9.4	7.7	9.6	188	9.3	
Q33 Did a member of staff say one thing and another say something different?	8.7	7.4	9.1	190	8.4	
Q34 Were you involved as much as you wanted to be in decisions about your care and treatment?	8.0	6.5	8.8	189	8.1	
Q35 Did you have confidence in the decisions made about your condition or treatment?	9.1	7.6	9.4	189	9.2	
Q36 How much information about your condition or treatment was given to you?	9.5	8.2	9.7	186	9.4	
Q37 Did you find someone on the hospital staff to talk to about your worries and fears?	7.3	4.3	7.7	130	7.3	
Q38 Do you feel you got enough emotional support from hospital staff during your stay?	8.2	5.9	8.6	134	8.2	
Q39 Were you given enough privacy when discussing your condition or treatment?	9.3	7.9	9.5	188	8.9	
Q40 Were you given enough privacy when being examined or treated?	9.7	9.1	9.9	188	9.6	
Q42 Do you think the hospital staff did everything they could to help control your pain?	8.7	6.6	9.5	100	9.2	
Q43 If you needed attention, were you able to get a member of staff to help you within a reasonable time?	8.3	7.0	9.0	177	8.5	
Operations and procedures (answered by patients who had an operation or procedure)						
S8 Section score	8.8	7.7	9.3			
Q45 Did a member of staff answer your questions about the operation or procedure in a way you could understand?	9.2	8.6	9.7	82	9.5	
Q46 Were you told how you could expect to feel after you had the operation or procedure?	8.3	6.9	8.9	81	8.3	
Q47 Afterwards, did a member of staff explain how the operation or procedure had gone in a way you could understand?	8.8	7.3	9.2	82	8.4	

↑ or ↓ Indicates where 2019 score is significantly higher or lower than 2018 score
(NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2018 data is available.

Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

	Scores for this NHS trust	Lowest trust score in England	Highest trust score in England	Number of respondents (this trust)	2018 scores for this NHS trust	Change from 2018
Leaving hospital						
S9 Section score	8.2	6.3	8.4			
Q48 Did you feel you were involved in decisions about your discharge from hospital?	8.2	6.0	8.5	184	8.2	
Q49 Were you given enough notice about when you were going to be discharged?	8.3	6.2	8.7	187	8.2	
Q51 Discharge delayed due to wait for medicines / to see doctor / hospital transport.	6.1	5.0	8.5	185		
Q52 How long was the delay?	7.7	6.2	9.3	184	7.4	
Q54 After leaving hospital, did you get enough support from health or social care professionals to help you recover and manage your condition?	8.2	5.0	8.2	121	7.7	
Q55 When you left hospital, did you know what would happen next with your care?	8.4	5.8	8.4	175	7.9	
Q56 Were you given any written or printed information about what you should or should not do after leaving hospital?	6.2	4.6	9.2	177	6.2	
Q57 Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?	9.5	7.3	9.5	145	8.5	↑
Q58 Did a member of staff tell you about medication side effects to watch for when you went home?	7.1	3.5	7.4	125	6.3	
Q59 Were you given clear written or printed information about your medicines?	8.3	6.5	8.7	135	8.6	
Q60 Did a member of staff tell you about any danger signals you should watch for after you went home?	7.7	4.1	7.9	146	7.4	
Q61 Did hospital staff take your family or home situation into account when planning your discharge?	8.4	5.4	8.8	120	8.3	
Q62 Did the doctors or nurses give your family, friends or carers all the information they needed to help care for you?	7.5	4.6	7.9	129	7.4	
Q63 Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?	9.6	6.5	9.7	177	9.0	↑
Q64 Did hospital staff discuss with you whether additional equipment or adaptations were needed in your home?	9.3	6.8	9.4	56	8.6	
Q65 Did hospital staff discuss with you whether you may need any further health or social care services after leaving hospital?	9.5	4.4	9.5	89	8.9	
Q66 After being discharged, was the care and support you expected available when you needed it?	9.5	6.4	9.5	138		

↑ or ↓ Indicates where 2019 score is significantly higher or lower than 2018 score
(NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2018 data is available.

Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

	Scores for this NHS trust	Lowest trust score in England	Highest trust score in England	Number of respondents (this trust)	2018 scores for this NHS trust	Change from 2018
Feedback on care and research participation						
S10 Section score	2.7	0.8	3.7			
Q69 During this hospital stay, did anyone discuss with you whether you would like to take part in a research study?	2.1	0.5	3.8	150	2.0	
Q70 During your hospital stay, were you ever asked to give your views on the quality of your care?	2.1	0.5	3.5	152	2.0	
Q71 Did you see, or were you given, any information explaining how to complain to the hospital about the care you received?	4.0	0.8	4.3	137	3.6	
Respect and dignity						
S11 Section score	9.4	8.4	9.7			
Q67 Overall, did you feel you were treated with respect and dignity while you were in the hospital?	9.4	8.4	9.7	186	9.5	
Overall experience						
S12 Section score	8.9	7.4	9.2			
Q68 Overall...	8.9	7.4	9.2	186	8.8	

↑ or ↓

Indicates where 2019 score is significantly higher or lower than 2018 score
(NB: No arrow reflects no statistically significant change)
Where no score is displayed, no 2018 data is available.

Adult Inpatient Survey 2019

The Clatterbridge Cancer Centre NHS Foundation Trust

Background information

The sample	This trust	All trusts
Number of respondents	192	76915
Response Rate (percentage)	43	45
Demographic characteristics	This trust	All trusts
Gender (percentage)	(%)	(%)
Male	61	48
Female	39	52
Age group (percentage)	(%)	(%)
Aged 16-35	4	5
Aged 36-50	6	8
Aged 51-65	37	22
Aged 66 and older	53	65
Ethnic group (percentage)	(%)	(%)
White	96	92
Multiple ethnic groups	0	1
Asian or Asian British	1	2
Black or Black British	0	1
Arab or other ethnic group	0	0
Not known	3	3
Religion (percentage)	(%)	(%)
No religion	15	18
Buddhist	0	0
Christian	83	74
Hindu	0	1
Jewish	0	0
Muslim	0	2
Sikh	0	0
Other religion	1	1
Prefer not to say	2	3
Sexual orientation (percentage)	(%)	(%)
Heterosexual/straight	94	93
Gay/lesbian	1	1
Bisexual	1	1
Other	1	1
Prefer not to say	4	4

Briefing Paper : Adult Inpatient Experience Survey Results (2019) July 2020

Situation

The Clatterbridge Cancer Centre (CCC) has been voted one of England's top hospitals for inpatients in the latest adult inpatient experience survey. The trust is the highest scoring cancer hospital in the North West and one of only seven trusts in England to be rated "consistently" well above average after also achieving the same rating last year. The Care Quality Commission use the results from the survey in the regulation, monitoring and inspection of NHS acute trusts in England.

Background

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

The 2019 survey of adult inpatients conducted by the Care Quality Commission (CQC) involved 143 acute and specialist NHS trusts. 76,915 people responded to the survey, yielding an adjusted response rate of 45%. Patients were eligible for the survey if they were aged 16 years or older and had spent at least one night in hospital. Trusts sampled patients discharged during July 2019.

The number of respondents for CCC was 192 in total which equates to 43%. Male responders 61% and female responders 39% with the majority of patients aged 51 and over. Ethnic group recorded predominantly white 96%.

CQC will use the results from the survey in the regulation, monitoring and inspection of all NHS acute trusts in England including CQC inspections. NHSEI will also use the results to check progress and improvement against the objectives set out in the NHS mandate.

Assessment

CCC was highlighted as one of the best performing trusts in England across 9 out of 12 sections of the report and the same as the majority of trusts in 1 section. The Accident and Emergency department was not applicable and the hospital /ward section did not receive an overarching score as < 30 patients replied.

The survey covered a range of 12 topics including; waiting list /planned admissions, waiting to get a bed on a ward, doctors, nurses and leaving hospital. It asked for patient's opinions on the care they received, including the quality of the information provided, whether they had enough privacy during their stay, as well as the amount of support given to help them eat and drink and assist with personal hygiene requirements. (Appendix 1 – Full report)

Section scores and key areas for improvement;

Section	Trust score	Area for improvement – Score <8.0	Score Comparison 2018
Waiting list or planned admissions	9.6 = to the highest trust score in England	3 Questions; lowest score = 9.5	2 scores marginally lower than 2018 1 score same as 2018

Waiting to get a bed on a ward	9.3 = highest trust score in England	1 Question	Score higher than 2018
The hospital & ward	No score recorded	11 Questions; Only score below 8 = 6.1 • How would you rate the hospital food	Same score as 2018
Doctors	9.4	3 Questions; Lowest score 9.2	3 scores higher than 2018
Nurses	8.5	5 Questions; Only score below 8 = 7.0 • Did you know which nurse was in charge of looking after you	5 scores marginally lower than 2018
Care & Treatment	8.8	12 Questions; Only score below 8 = 7.3 • Did you find someone on the hospital staff to talk about your worries and fears	5 scores higher than 2018 5 scores lower than 2018 2 scores same as 2018
Operations and Procedures	8.8	3 Questions; Lowest score 8.3	1 score higher than 2018 1 score lower than 2018 1 score same as 2018
Leaving hospital	8.2	17 Questions; 6 scores below 8 • Discharge delay due to medicines/see doctor/hospital transport (6.1) • How long was your delay (7.7) • Were you given any written or printed information about what you should/should not do after leaving hospital (6.2) • Did a member of staff tell you about medication side effects to watch for when you went home (7.1) • Did a member of staff tell you about any danger signals you should watch for after you went home (7.7) • Did the Doctors or nurses give your family, friends or carers all the information they needed to help care for you (7.5)	12 scores higher than 2018 2 scores same as 2018 2 scores new questions 1 score lower than 2018
Feedback on care and research participation	2.7 Highest score in England 3.7	3 Questions; 2 scores below 4.0 • During this hospital stay, did anyone discuss with you whether you would like to take part in a research study (2.1) • During your hospital stay, were you ever asked to give your views on the quality of your care (2.1)	3 scores higher than 2018
Respect & Dignity	9.4	1 Question	1 score marginally lower than 2018
Overall Experience	8.9		Score higher than 2018 (8.8)

Benchmarking:

Benchmarked against our peer organisations - Christie = 8.8 Marsden = 8.9

Benchmarked against local specialist trust - Walton Centre = 8.9

Benchmarked against local acute trusts - WUTH = 8.2 RLH = 8.4
AUH = 8.3 StHK = 8.2

Conclusion

The Clatterbridge Cancer Centre (CCC) NHS Foundation Trust has been voted one of England's top hospitals for inpatients in the 2019 Adult Inpatient Patient Experience Survey conducted by the Care Quality Commission (CQC). CCC is the highest-scoring cancer hospital in the North West and the joint-highest cancer hospital nationally. The organisation

is also one of only seven trusts in England to be rated “consistently well above average” after achieving the same rating last year.

The 2019 Adult Inpatient Survey, rated CCC “well above average” when compared to other hospitals in nine out of ten survey categories, including Care and Treatment, Waiting Lists and Leaving Hospital. One hundred and ninety-two (192) patients from The Clatterbridge Cancer Centre responded to the survey, having been discharged from hospital in July 2019.

The survey asked patients to give their opinions on the care they received, including quality of information and communication with staff, whether they were given enough privacy, the amount of support given to help them eat and drink and assist with personal hygiene and on their discharge arrangements.

The trust scored particularly highly when it came to patients’ satisfaction with medical staff, achieving 9.7 out of 10 for confidence and trust in the doctors treating them. Confidence in nurses was also high at 9.2 and nurses also scored high 9.4 for not talking in front of patients as if they were not there.

Significant improvements were seen in the following areas; Staff members explaining the purpose of the medicines to patients 9.5, time waiting for a ward bed 9.3, patients given enough privacy when discussing condition/treatment 9.3, a member of staff explaining how an operation/procedure had gone in a way that was easily understood 8.8, after leaving hospital patients received enough support from health & social care professionals to help them recover 8.2 and whether you may need any further health and Social care services after leaving hospital 9.5.

The Clatterbridge Cancer Centre (CCC) has been voted one of England’s top hospitals for inpatients in the latest survey, the trust is the highest scoring cancer hospital in the North West and one of only seven trusts in England to be rated “consistently” well above average after also achieving the same rating last year.

- Overarching score of 8.9 for overall patient experience
- Higher score than last year (8.8)
- Highest score among our peers, specialist trust and local acute partners

Next Steps

- Share report with directorates/services – table at Quality & Safety meetings
- Review report findings with Matrons/Q & S leads
- Produce corporate action plan to capture areas for improvement
- Produce directorate action plan to capture specific areas for improvement
- Patient Experience Manager (PEM) to support Matrons and directorate Patient Safety/Quality leads re; implementation of improvements in practice
- PEM to review progress/delivery of 2018 action plan.
- Action plan progress to be monitored/managed via Patient Experience and Inclusion Group
- Update reports presented to IGC for assurance regarding action plan delivery

Recommendation

The Board are asked to note and support the contents of this report.

Karen Kay - Deputy Director of Nursing