

<b>To:</b>	<b>Trust Board</b>
<b>From:</b>	Jennie Negus. Deputy Chief Nurse
<b>Date:</b>	13 <sup>th</sup> July 2018
<b>Healthcare standard</b>	<p><b>Care and welfare of people who use services</b> People experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.</p> <p><b>Respecting and involving people who use services</b> People understand the care and treatment choices available to them. They can express their views and are involved in making decisions about their care. They have their privacy, dignity and independence respected, and have their views and experiences taken into account in the way in which the service is delivered.</p> <p><b>Complaints</b> People and those acting on their behalf have their comments and complaints listened to and acted on effectively, and know that they will not be discriminated against for making a complaint.</p> <p><b>Cooperating with other providers</b> People receive safe and coordinated care when they move between providers or receive care from more than one provider.</p>

<b>Title:</b>	National Inpatient Survey Report 2017
<b>Author/Responsible Director: Jennie Negus / Martin Rayson</b>	
<b>Purpose of the Report:</b> To present to the Board the results of the 2017 national inpatient survey and actions taken.	
<b>The Report is provided to the Board for:</b>	

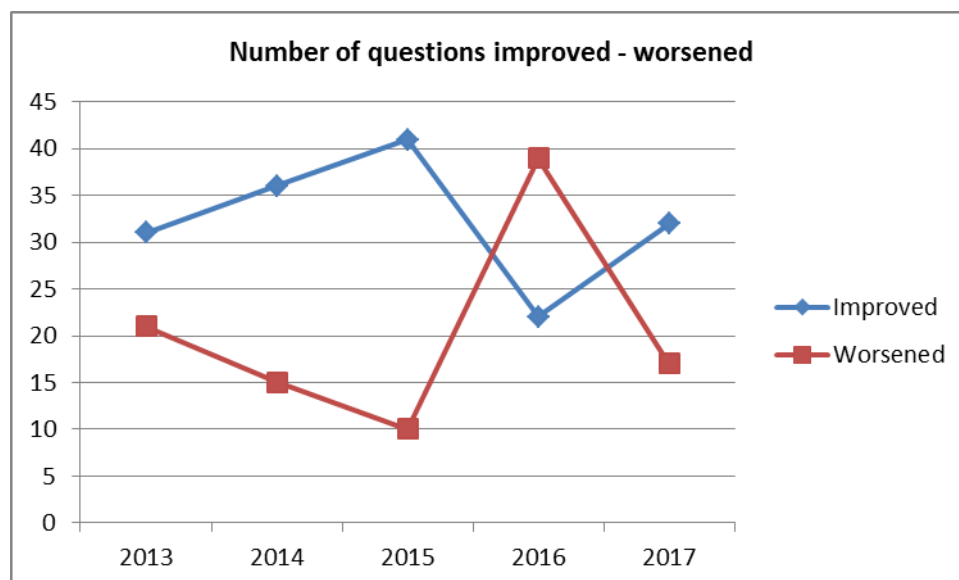
## Agenda Item 9.6

Decision		Discussion	√
Assurance	√	Information	√

### Summary/Key Points:

Whilst the Trust had received its internal report in March it was embargoed until the CQC published the 2017 survey results on 13<sup>th</sup> June 2018.

The picture is a better one this year with a higher number of questions showing an improved score than those with a fall. The range of variance is wide with highs of 7% improvement to a low of 8% deterioration.



In 2016 the Trust was ranked 'about the same' across all questions and domains apart from one question 'during your hospital stay were you ever asked to give your views on the quality of your care' which was rated 'worse than'. In 2017 the national comparative results were unchanged with a ranking of 'about the same' across all questions with the continued exception of being asked to give views on quality of care; this is against ranked worse than other Trusts and internally saw a further 2% deterioration. This is a real disappointment as initiatives such as Golden Hour and assurance rounds, executive walk rounds all do include asking patients about their care; however a more structured approach is clearly needed. We know we have many methods for seeking feedback afterwards but this questions is specifically aimed at whilst the patient is still receiving care.

There were a number of questions where the Trust is touching the lower edge of the confidence interval and will be a focus for action planning; these include:

Q3: information provided in ED

## Agenda Item 9.6

Q21: help to eat meals  
Q24: confidence and trust in doctors  
Q56: written information on leaving hospital  
Q64: who to contact after discharge.

Conversely there are a number of questions where the Trust is touching the highest performing Trusts and these include:

Q22: having enough to drink  
Q28: nurses not talking in front of patients as if they were not there  
Q42: pain control  
Q71: well looked after by non-clinical staff.

A number of actions and initiatives are in progress:

- Trust level action plan being updated.
- Staff and patient experience 'basket of questions' project about to be launched which draws questions from both staff and patient surveys that will be asked in year and in near real time to enable services to know what their patients and staff are experiencing and enable improvement actions to be identified and implemented.
- Drill down data from the survey to locations will be made available by the researchers soon enabling some more focused work to be undertaken.

The 2018 inpatient survey will commence sampling within the next month.

### **Recommendations:**

The Board is asked to note the report and its findings, to support improvement actions and seek assurance from directorates that action is being taken.

### **Strategic Risk Register**

### **Performance KPIs year to date**

### **Resource Implications (eg Financial, HR)**

### **Assurance Implications**

### **Patient and Public Involvement (PPI) Implications**

### **Equality Impact**

### **Information exempt from Disclosure**

### **Requirement for further review?**