



Statistical bulletin:
Overall patient experience scores

***2014 Accident and Emergency department
survey update***

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Statistical bulletin: Overall patient experience scores

*2014 accident and emergency department survey
update*

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Overall patient experience scores 2014 accident and emergency department survey update

This publication updates this regular statistical series to include results from the accident and emergency department (A&E) survey, which surveyed patients who had visited A&E during January, February or March 2014.

These statistics use a set of questions from the National Patient Survey Programme¹ to produce a set of overall scores that measure patient views on the care they receive.

NHS England produce separate sets of scores for different NHS services; this update focuses on the A&E setting. **The next planned update is for the Adult inpatient survey, expected in April 2014.**

1 2014 accident and emergency department survey: key findings

The overall patient experience score for NHS A&E services for 2014-15 is shown in table 1 below; the scores for each of the five domains used to construct the overall measure are also presented.

Due to several minor survey changes implemented in 2014, the change in scores from 2012-13 to 2014-15 should be interpreted with caution. The survey changes directly affect the domains 'building closer relationships' and 'clean, comfortable place to be' and impact on the overall score. More information about the changes is provided in section 5. Analysis has shown that, if we adjust our analysis to exclude the question most affected by the survey alterations, the change in scores from 2012-13 to 2014-15, would still be significant.

Table 1: Patient experience scores for the A&E survey, England, 2012-13 to 2014-15

	2012-13	2012-13 adjusted ²	2014-15		2014-15 95% confidence interval
Access & waiting ¹	64.3	67.0	67.7	s	0.22
Safe, high quality, coordinated care	74.5	74.5	76.0	s	0.35
Better information, more choice	74.8	74.8	75.8	s	0.47
Building closer relationships	80.8	80.8	81.9	s	0.25
Clean, friendly, comfortable place to be	82.2	82.2	84.2	s	0.24
Overall patient experience score	75.4	75.9	77.2	s	0.28

Results marked with an S show a statistically significant change from 2012-13 to 2014-15

Notes:

1. For 2014-15, the scoring regime used for the question "Overall, how long did your visit to the A&E department last?" (Question 9) has been amended.
2. The 2012-13 score has been adjusted to reflect the new scoring regime for question 9 (see note 1) to allow direct comparison with 2014-15.

Source: National Patient Survey Programme

¹ The National Patient Survey Programme is overseen by the Care Quality Commission (CQC) and covers a range of NHS settings on a rolling programme of surveys. The CQC publishes detailed results from each survey on its own website, whilst this publication provides an overall index score.

2 2014 A&E survey update

2.1 Context and interpretation

The question that these scores seek to answer is “*has patient experience changed over time?*” These scores do not translate directly into descriptive words or ratings, but present results out of 100 for specific aspects of experience for NHS patients, after they have used the NHS. If patients reported all aspects of their care as ‘good’, we would expect a score of about 60. If they reported all aspects as ‘very good’, we would expect a score of about 80.

Scores for different aspects of care, or for different service settings, cannot be compared directly. For example, we cannot say that the NHS is ‘better’ at ‘access & waiting’ than it is at ‘information and choice’, or that mental health services are ‘better’ than outpatient services, but the results can be used to look at change over time **where methods have not changed**.

These statistics are conceptually different from measures of general public perception of the NHS, which are important in their own right but may be influenced by other factors such as the respondent’s political views. These statistics are not a satisfaction or approval measure, but a summarised set of scores, reported by patients, on those aspects of care that matter to patients.

A narrative summary of the underlying survey data has been published by the Care Quality Commission (CQC) and is available at the following link:

<http://www.cqc.org.uk/content/accident-and-emergency-2014>

We have published a number of supporting documents to aid interpretation of these statistics, including a *methods, reasoning and scope* document. They can be found at:

www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/

2.2 What is a confidence interval?

In these statistics, NHS England has used survey responses from nearly 40,000 patients to estimate the typical experience for all patients in NHS A&E departments. Confidence intervals provide a range of values within which we are confident that the true value is likely to lie. In this publication, confidence intervals are expressed as a ‘plus or minus’ figure. For example, our overall score for the A&E survey has a confidence interval of plus or minus 0.28. This means that the true value is likely to lie in a range from 0.28 below our estimate to 0.28 above it.

Confidence intervals show how much variability there is in scores derived from survey data. It is important to look at the confidence intervals as well as the reported score. A more precise explanation is that the confidence interval gives the range that the true patient experience score lies in, at a given level of confidence. At the 95 per cent confidence level, on average, the confidence interval is expected to contain the true value around 95 per cent of the time.

If we were to repeat this survey 100 times, we would expect the stated confidence interval to contain the ‘true’ population value at least 95 times out of 100.

2.3 What lies beneath these headline scores?

The headline scores are calculated by taking the average score for small sets of survey questions.

Access & waiting: three survey questions, up from 67.0 to 67.7

This domain captures information about the length of time patients' A&E visits lasted and how long they waited before interactions with doctors or nurses. While results improved for the two questions about the length of time patients waited before speaking to a nurse or doctor (up from 63.5 to 65.5) and before being examined (up from 63.3 to 64.4), the reported length of time that A&E visits lasted overall has increased (score down from 74.2 to 73.4).

Safe, high quality coordinated care: three survey questions, up from 74.5 to 76.0

This domain includes questions about whether patients had trust and confidence in those treating them, whether they were given consistent messages by different members of staff and whether they were warned of danger signals to observe after they had been discharged. Results have improved significantly for two questions: more patients reported being warned about danger signals regarding their illnesses to watch for (score up from 52.0 to 55.4) and more patients felt confidence and trust in those treating them (up from 84.0 to 84.7).

Better information, more choice: four survey questions, up from 74.8 to 75.8

This domain captures feedback on whether patients were involved as much as they wanted to be in their care and treatment, whether they received the right amount of information about their condition and treatment and whether staff clearly explained the purpose and side effects of medicines. Scores increased significantly for three of the four questions, with no change in the way patients feel about the amount of information given to them about their condition and treatment (85.3).

Building closer relationships: five survey questions, up from 80.8 to 81.9

This domain assesses whether doctors or nurses spoke about patients as if they weren't there, patients were not there, whether patients felt listened to, whether patients had enough time to discuss their health or medical problems and anxieties or fears and whether conditions and treatments were explained in a way that patients could understand. Results increased for all questions and these changes were significant for four of the five scores. The largest increase was in patients feeling that doctors and nurses listened to their anxieties and fears (up from 67.6 to 69.9).

Clean, friendly, comfortable place to be, four questions, up from 82.2 to 84.2

This domain assesses the cleanliness of the A&E department and how patients felt they were treated by staff including much privacy they were given, whether they were helped to manage their pain and if they felt that they were treated with dignity and respect. The scores for all the questions improved and these changes were significant for three for the four questions.

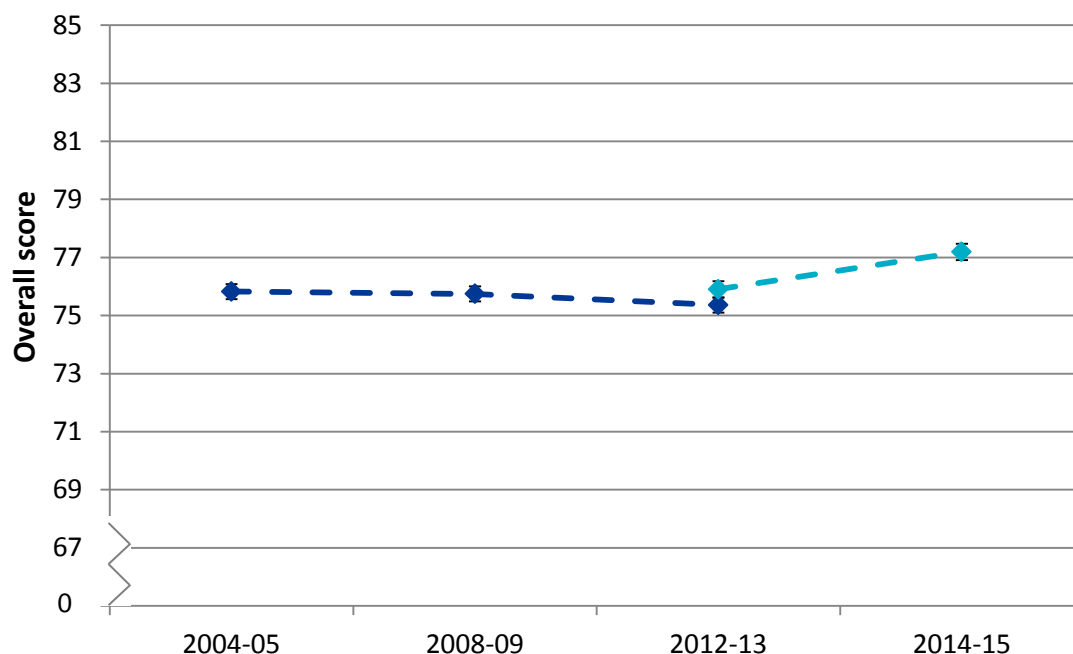
The largest change in this domain was for patients feeling that hospital staff did everything they could to help control their pain (up from 69.3 to 74.5). However, responses to this question are likely to have been influenced by the new survey questions introduced in 2014 so the magnitude of the change in score should be interpreted with caution.

2.4 Trends in the scores

Results for A&E services have been published on a consistent basis for 2004, 2008 and 2012. For 2014, the scoring regime used for the question "Overall, how long did your visit to the A&E department last?" (Question 9) has been amended based on expert advice. As a result, data collected in 2014 is not directly comparable with previous years. To facilitate an historic

comparison for 2014, the 2012 data has been re-scored using the new methodology for question 9. Figure 1 below plots overall scores from 2004 to 2014; the discontinuity at 2012-13 reflects the adjusted score (note that the graph does not start at zero, so changes over time are exaggerated).

Figure 1: Overall patient experience scores for A&E services, England 2004-05 to 2014-15



The chart shows overall patient experience scores with associated 95% confidence intervals.

Due to changes in the scoring methodology for one question in 2014/15, the 2012/13 score is not directly comparable to previous years. To allow for direct comparison between 2014/15 and 2012/13, an adjusted score for 2012/13 has also been produced using the new scoring regime. Further details of the methodology can be found in the accompanying overall patient experience measure 'Methods, Reasoning and Scope' guidance at www.england.nhs.uk/statistics/statistical-work-areas/patient-experience/

2.5 Variations in the scores: demographics

It is sensible to consider whether patient experience varies for patients in different demographic groups, but there are several difficulties in reporting scores for separate groups:

- i) Firstly, even for survey questions that are direct and objective, the results vary slightly by demographic group. For example, older patients tend to give more positive answers even to factual questions.
- ii) Our overall measure is adjusted to take account of these subjective variations by age and gender. When reporting on results for different groups we need to consider how these adjustments combine with the way we calculate the scores (for example, if we adjust by age, an age breakdown of results would show no differences).
- iii) For some demographic groups the number of responses is very small, and so the confidence interval on results is very large. For example, the number of responses from the White and Black African ethnic group is 51 nationally.

These considerations mean that it is not possible to provide meaningful data on ethnic categories for NHS trust level data, but we are able to examine differences at national level. Table 2 below shows the overall score for each ethnic group in the 2014 data. We use a two-tailed t-test and a 5% threshold of significance to determine whether there are statistically significant differences in scores across the ethnic groups. As White British is the dominant

ethnic group, other groups are compared with it. The following groups have scores significantly different to White British: Any other White background, White & Black Caribbean, White and Black African, Indian, Pakistani, Bangladeshi, Any other Asian background, African and Any other Black background. All these groups have lower scores than White British, reflecting less positive experiences.

Table 2: Patient experience scores for ethnic groups, England 2014-15

	Overall score	Confidence Interval	Number of respondents
White British	77.7	0.31	33286
White Irish	78.7	1.36	404
White Gypsy or Irish Traveller	*	*	*
Any other White	74.6	S 1.06	1135
White & Black Caribbean	70.6	S 1.83	139
White & Black African	66.7	S 1.64	51
White & Asian	75.8	1.95	116
Any other mixed background	79.1	1.94	77
Indian	72.4	S 1.30	626
Pakistani	69.1	S 1.63	394
Bangladeshi	69.2	S 1.89	97
Chinese	75.6	1.35	124
Any other Asian Background	73.1	S 1.55	214
African	73.8	S 1.57	419
Caribbean	75.6	1.38	291
Any other Black background	65.5	S 1.29	37
Arab	72.6	2.08	71
Any other Ethnic group	72.4	2.61	58

Ethnic group is unknown for 1748 respondents

Notes:

Results marked with * are not available due to small sample sizes
Results marked **S** are significantly different from White British

Table 3 below shows the overall score for the group of patients that self-report having a long-standing condition and the group of patients that report that they do not have a long-standing condition. Significance is determined in the same way as for ethnic groups. In this case, the reference category is those patients with a long-standing condition as it is the largest group. The overall scores are significantly different for those patients who do and do not report having a long-standing condition (denoted by **s** in table 3 below).

Table 3: Patient experience for patients with and without long-standing conditions

Health Status	Overall score	Confidence Interval	Number of respondents
Long-standing Condition	75.68	0.45	18,683
No long-standing Condition	78.62	S 0.37	18,188

Health status is unknown for 2,499 survey respondents

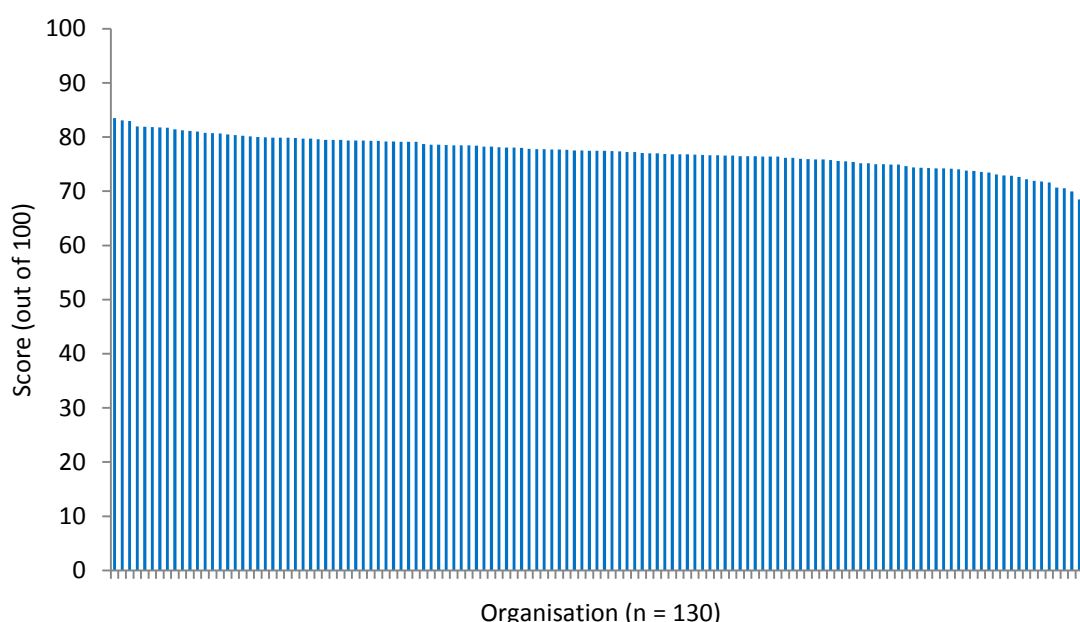
2.6 Variation at NHS organisational level

We need to be cautious when considering these statistics at trust level due to the size of the confidence intervals (i.e. the range within which we can be sure the true score lies is wider for trusts than at national level). At national level, results are based on nearly 40,000 responses and we can be confident that the true score lies within a small range (in this case, plus or minus 0.28). For trust level data, we are typically looking at less than 300 responses and we can only have confidence that scores are accurate within a range of plus or minus around 3 points.

This means it can be difficult to assess whether scores for an individual trust are significantly different from the average.

Figure 2 shows the overall patient experience score for each trust, with the higher scores towards the left and the lower towards the right. There are 130 trusts in 2014 with overall scores². Scores range from 67.2 to 83.5, with an average of 77.2. There are 25 trusts with scores that are significantly above the average and 31 with scores that are significantly below the average.

Figure 2: Trust level overall patient experience scores



We may wish to consider whether different trusts have strengths and weaknesses in different areas, however trusts that score well in one domain tend to score well on other domains too. On average, if a trust scores 10 points more than another trust on one domain, it would, on average, score around 7 points higher on any other domain as well (formally there is a positive correlation of around 0.7).

Due to the relatively large confidence intervals around trust level scores, there are relatively few statistically significant organisational level changes in results between years. A change is identified as significant over time using a t-test with a 5% threshold of statistical significance. Table 3, below, shows the number of NHS trusts that recorded significant increases or decreases in their overall and domain scores between 2012 and 2014.

Table 3: Number of increased and decreased scores at trust level (2014 compared to adjusted 2012)

² Where a trust has less than 30 responses for a particular survey question, the trust does not have a score for the domain that contains that question and it does not have an overall score. In total, 142 trusts took part in the survey for 2014, 12 trusts had less than 30 responses to one or more survey questions used to construct the overall patient experience scores.

	Increase	Decrease
Overall Scores	21	11
Access & waiting	37	22
Safe, high quality, coordinated care	23	4
Better information, more choice	12	12
Building closer relationships	26	6
Clean, comfortable, friendly place to be	44	1

Note: Changes based on 130 trusts with comparable data in 2014 and 2012

The number of organisations with significant changes in each direction across the domains corresponds with the change in the England level scores between 2012-13 and 2014-15. At England level, significant increases were seen in the overall score and all domain scores. This is reflected at trust level with more increases than decreases in trust scores overall and in each domain. However, it is important to note that not all changes in trust scores reflect the changes at England level: some trusts deteriorate on a domain score that is generally improving.

Results at trust level are published in our diagnostic tool, which is available at:

www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/

Within a domain there may be individual questions where the relative number of trusts with increases or decreases in scores does not match that of the domain score. For example, in the domain 'Building closer relationships', more trusts had significant decreases (14) than increases (12) in scores for whether doctors or nurses talk in front of patients as if they weren't there.

Note on the effect of trust mergers

Our scores for England are based on the average of the trust scores. We compare trust results over time, but this is affected when trusts have merged in the period between surveys. For example, in the 2012 survey there were three trusts in east London. By the 2014 survey, these three trusts had combined to become Barts Health NHS Trust. Such mergers usually have a small effect on the England score and they have a small effect in this survey.

3 Feedback

NHS England aims to make its National Statistics accessible, useful and appropriate for the needs of users. We welcome feedback, and comments can be sent by email to:

England.feedback-data@nhs.net

4 Background notes – The National Patient Survey Programme

These results are based on data from the NHS National Patient Survey Programme. These surveys are conducted on a rolling programme, with different NHS settings surveyed in different years. Settings include inpatients, outpatients, community mental health, and accident and emergency. The programme is coordinated by the Care Quality Commission (CQC), but each survey is paid for and carried out by individual NHS organisations.

The survey programme is designed to collect structured and systematic feedback on service delivery from the patients' actual experience. In this way the programme provides robust data on

service issues that are important to patients, many of which would otherwise be unmeasured – e.g. staff behaviour, levels of involvement, information provision etc.

Fieldwork for each survey is usually carried out over a three-month period. Timings depend on the survey setting and are defined by CQC as part of the survey programme. Patients were eligible for the 2014 A&E survey if they were aged 16 years or older and were not staying in hospital at the time patients were sampled. Patients visited A&E during January, February or March 2014.

Sample sizes and response rates vary depending on the survey setting and by question. Almost 40,000 people responded to the A&E survey (a response rate of 34%). The CQC website includes information on the surveys and the CQC national survey publications (including percentage scores for individual questions and details of the number of respondents and response rates).

The CQC results for the A&E surveys can be found at:

<http://www.cqc.org.uk/content/accident-and-emergency-survey-2014>

CQC publish trust-level reports that detail information such as the trust scores for each survey question and associated confidence intervals and response numbers, this can be found at:

<http://www.nhssurveys.org/surveys/819>

5 Overview of survey changes for 2014

The 2014 A&E survey has been subject to minor changes that are likely to have an impact on the 'overall patient experience scores'. The affected questions are listed below with a description of the changes. Full information about the changes and the evidence base is available in the Survey Development Report, available via the following link:

<http://www.nhssurveys.org/surveys/763>

“Did doctors or nurses talk to each other about you as if you weren’t there?” (Building Closer Relationships): For the purposes of clarification, the wording of this question has been amended from “Did doctors or nurses talk in front of you as if you weren’t there?”. Despite this amendment, the scores for this question for 2012 and 2014 are not significantly different (89.1 and 89.2 respectively).

“Do you think staff did everything they could to help control your pain?” (Clean, comfortable, friendly place to be): Two additional questions about pain relief have been added to the survey, preceding this question. The inclusion of these questions is likely to have affected the way that people respond when asked about pain control. The results indicate a relatively large increase in the score for this question, from 69.4 in 2012 to 74.5 in 2014.

6 Full set of tables: overall patient experience scores

The following tables show results for the 'overall patient experience scores' for England, for different years and different NHS settings. Scores are based on results from the National Patient Survey Programme and are calculated in the same way each year so that the experience of NHS patients can be compared over time. The methodology for calculating these scores was agreed initially by the Department of Health and the Care Quality Commission (formerly the Healthcare Commission). NHS England, which is now responsible

for the publication of the series, agrees with the adopted methodology.

This publication updates the patient experience scores, last updated with community mental health patient experience scores in September 2014.

The information in these tables has been provided separately in CSV format, available alongside this publication. One CSV file contains results for acute trusts, and a separate CSV file contains results for mental-health trusts.

Inpatient survey: national scores

	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2013-14 95% confidence interval
Access & waiting	83.8	84.9	85.0	84.2	83.8	84.3	84.6	S 0.20
Safe, high quality, coordinated care	64.9	65.3	64.4	64.6	64.8	65.4	66.4	S 0.24
Better information, more choice	66.7	67.7	66.8	67.2	67.2	68.2	68.8	S 0.27
Building closer relationships	83.0	83.2	82.9	83.0	83.0	84.6	84.7	0.17
Clean, friendly, comfortable place to be	78.1	79.2	79.1	79.4	79.4	79.8	80.1	S 0.15
Inpatient overall patient experience score	75.3	76.0	75.6	75.7	75.6	76.5	76.9	S 0.16

Source: National Patient Survey Programme

Results marked with an **S** show a statistically significant change from 2012-13 to 2013-14

Details of the methodology can be found in the accompanying 'Methods, Reasoning and Scope' guidance at www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/

Outpatient survey: national scores

	2002-03	2004-05	2009-10	2009-10 adjusted ²	2011-12		2011-12 95% confidence interval
Access & waiting ¹	68.2	69.0	72.5	73.3	74.9	S	0.17
Safe, high quality, coordinated care	83.0	82.2	83.2	83.2	83.6	S	0.18
Better information, more choice	77.2	77.3	79.1	79.1	78.6	S	0.35
Building closer relationships	86.4	86.5	87.3	87.3	87.7	S	0.18
Clean, friendly, comfortable place to be	69.7	68.5	70.9	70.9	71.3	S	0.20
Outpatient overall patient experience score	76.9	76.7	78.6	78.8	79.2	S	0.18

Source: National Patient Survey Programme

Results marked with an **S** show a statistically significant change from 2009-10 to 2011-12

Notes:

1. The scoring regime used for the question about length of wait for an appointment (question A1 in 2002-03 and question 1 in 2004-05) has been adjusted from that published by the contractor appointed to run the NHS Survey Advice Centre, to allow comparison across years.
2. The 2009-10 score is adjusted to allow for direct comparison with 2011-12.

Details of the methodology can be found in the accompanying overall patient experience measure 'Methods, Reasoning and Scope' guidance at www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/

Accident and emergency department survey: national scores

	2004-05	2008-09	2012-13	2012-13 adjusted ²	2014-15	2014-15 95% confidence interval
Access & waiting ¹	69.4	66.6	64.3	67.0	67.7	S 0.22
Safe, high quality, coordinated care	74.7	75.1	74.5	74.5	76.0	S 0.35
Better information, more choice	73.5	74.4	74.8	74.8	75.8	S 0.47
Building closer relationships	80.4	81.3	80.8	80.8	81.9	S 0.25
Clean, friendly, comfortable place to be	81.0	81.4	82.2	82.2	84.2	S 0.24
Accident and emergency overall patient experience score	75.8	75.7	75.4	75.9	77.2	S 0.28

Source: National Patient Survey Programme

Results marked with an **S** show a statistically significant change from 2012-13 to 2014-15

Notes:

1. For 2014-15, the scoring regime used for the question "Overall, how long did your visit to the A&E department last?" (Question 9) has been amended based on expert advice.
2. The adjusted 2012-13 scores allow direct comparison with 2014-15 (see note 1).

Details of the methodology can be found in the accompanying overall patient experience measure 'Methods, Reasoning and Scope' guidance at www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/

Community mental health survey: national scores

Table 1	2014-15	
	2014-15	95% confidence interval
Access & waiting	82.2	0.50
Safe, high quality, coordinated care	71.4	0.65
Better information, more choice	71.5	0.58
Building closer relationships	78.2	0.46
Community mental health overall patient experience score	75.8	0.45

Source: National Patient Survey Programme

Due to redevelopment of the 2014 community mental health survey, the scores for 2014-15 are not comparable with previous years. Results from 2011-12 to 2013-14 are presented in table 2 below.

Details of the methodology can be found in the accompanying overall patient experience measure 'Methods, Reasoning and Scope' guidance at www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/

Table 2					2013-14
	2011-12	2012-13	2012-13 adjusted ¹	2013-14	95% confidence interval
Access & waiting	71.1	72.4	72.4	72.4	0.58
Safe, high quality, coordinated care	72.1	71.3	68	67.4	0.60
Better information, more choice	68.3	69.1	65.8	65.4	0.59
Building closer relationships	84.7	84.7	82.4	81.1	S 0.40
Community mental health overall patient experience score	74.1	74.4	72.2	71.6	S 0.44

Source: National Patient Survey Programme

Notes:

1. The scoring regime was changed in 2013-14 to remove CPA-based scoring on certain questions in the community mental health service users survey. Due to this change, the 2013/14 national score is not comparable with previous years. To allow for direct comparison between 2013/14 and 2012/13, an adjusted score for 2012/13 has been calculated, incorporating the new scoring regime. Details of the change are available at: http://www.nhssurveys.org/Filestore/MH13/MH13_Recommendation_to_discontinue_CPA-differentiated_scoring_v1.pdf