



Statistical bulletin:
Overall patient experience scores

2014 Adult inpatient survey update

NHS Information Reader Box

Document Purpose	For Information
Gateway Reference	N/A
Title	Statistical bulletin. Overall patient experience scores: 2014 Adult inpatient survey update
Author	NHS England Analytical Team (Patients & Information, Nursing and Medical)
Publication Date	21 May 2015
Target Audience	Users of NHS patient experience statistics
Circulation List	N/A
Description	This is the routine statistical publication 'overall patient experience scores', updated to show the scores from the 2014 Adult inpatient survey, which is administered by the Care Quality Commission and assesses the experiences of adult patients in acute and specialist NHS trusts.
Cross Ref	N/A
Superseded Docs	Statistical bulletin. Overall patient experience scores: 2014 Accident and Emergency survey update
Action Required	N/A
Timing	N/A
Contact Details	england.feedback-data@nhs.net

Statistical bulletin: Overall patient experience scores

2014 Adult inpatient survey update

First published: 21st May 2015

Prepared by: NHS England Analytical Team

Contents

Contents.....	4
1 2014 Adult Inpatient survey: key findings.....	5
2 2014 Adult Inpatient survey update	6
2.1 Context and interpretation.....	6
2.2 How scores are constructed	6
2.3 What is a confidence interval?	6
2.4 What lies beneath these headline scores?.....	7
2.5 Trends in the scores	8
2.6 Variations in the scores: demographics	8
2.7 Variation at NHS organisation level	10
3 Feedback.....	11
4 Background notes – The National Patient Survey Programme.....	12
5 Overview of survey changes for 2014.....	12
6 Full set of tables: overall patient experience scores	13

Overall Patient Experience Scores: 2014 Adult inpatient survey update

This publication updates this regular statistical series to include results from the latest adult inpatient survey, which surveyed patients aged 16 years or older who had spent at least one night in hospital and were not admitted to maternity or psychiatric units during June, July or August 2014.

These statistics use a set of questions from the National Patient Survey Programme¹ to produce a set of overall index 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 adult inpatient setting. **The next planned update is for the 2015 Community Mental Health survey, expected in September 2015.**

1 2014 Adult inpatient survey: key findings

The overall patient experience score for NHS adult inpatient 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. An overview of how the scores are constructed is provided in section 2 below.

Overall patient experience of adult inpatient services significantly decreased between 2013-14 and 2014-15, down from **76.9 out of 100** to **76.6 out of 100**.

The domain scores with statistically significant changes are: Access & Waiting (decreasing from 84.6 to 83.8) and Safe, High Quality, Coordinated Care (decreasing from 66.1 to 65.5).

Table 1: Patient experience scores for the adult inpatient survey, England, 2011-12 to 2014-15

	2011-12	2012-13	2013-14	2014-15		2014-15 95% confidence interval
Access & waiting	83.8	84.3	84.6	83.8	S	0.20
Safe, high quality, coordinated care	64.8	65.4	66.1	65.5	S	0.25
Better information, more choice	67.2	68.2	68.8	68.9		0.28
Building closer relationships	83.0	84.6	84.7	84.6		0.17
Clean, friendly, comfortable place to be	79.4	79.8	80.1	80.1		0.15
Overall patient experience score	75.6	76.5	76.9	76.6	S	0.17

Source: National Patient Survey Programme, Care Quality Commission

Further details of the methodology can be found in the accompanying methodological issue paper at: <http://www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/>

Results marked with an **S** show a statistically significant change from 2013-14 to 2014-15
The full set of tables are shown at the end of this publication

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 Adult inpatient 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 at least 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.

2.2 How scores are constructed

Domain scores are an average of the question scores used to feed into that domain. The Overall Score is an average of the domain scores.

Patient level survey data is used to calculate question scores by assigning each patient’s question response option with a ‘weight’ between 0 and 100 (where higher weights reflect better reported experience) and calculating the average weighted score for each question. For example, for the question ‘Was your admission date changed by the hospital?’ the following scoring applies:

Response options	Scoring
No	100
Yes, once	67
Yes, 2 or 3 times	33
Yes, 4 or more times	0

The scoring mechanism is applied to respondent level results before being aggregated up to trust or national level.

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

www.cqc.org.uk/public/reports-surveys-and-reviews/surveys/inpatient-survey-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/

2.3 What is a confidence interval?

In these statistics, NHS England has used survey responses from nearly 59,000 patients to estimate the typical experience for all NHS adult inpatients. 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, the overall score for the 2014 Adult inpatient survey has a confidence interval of plus or minus 0.17. This means that the true value is likely to lie in a range from 0.17 below our estimate to 0.17 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. So 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.

2.4 What lies beneath these headline scores?

The headline scores (also called domain scores) are calculated by taking the average score for small sets of survey questions. Comparisons are made below for the results in 2013-14 and 2014-15.

Access & waiting: three survey questions, domain score significantly decreasing from 84.6 to 83.8

This domain captures information about how frequently hospitals change admission dates, how long patients wait for treatment (higher scores for shorter waits) and how long patients wait after arriving at hospital to be allocated a bed. Each of the three question scores significantly decreased: fewer patients report being admitted for treatment within an appropriate time (score decreasing from 84.1 to 83.2); more patients report having their planned admission date changed (score decreasing from 92.4 to 91.7); and more patients report waiting a long time before being allocated a bed or ward (score decreasing from 77.3 to 76.5).

Safe, high quality coordinated care: three survey questions, domain score significantly decreasing from 66.1 to 65.5

This domain includes questions about whether patients were given consistent messages by different members of staff, whether there were delays in discharge from hospital and whether patients were warned of danger signals to observe after they had been discharged. Results have improved significantly for one question score: more patients report being told about danger signals to be aware of after discharge (score improving from 54.1 to 54.7). The remaining two question scores have significantly decreased: more patients report being given inconsistent messages from staff (score decreasing from 81.2 to 80.8) and more patients report experience of delayed discharges (score decreasing from 63.1 to 61.1).

Better information, more choice: three survey questions, domain score being statistically comparable changing from 68.8 to 68.9

This domain captures feedback on whether patients were involved as much as they wanted to be in decisions about their care and treatment and whether staff clearly explained the purpose and side effects of medicines. Of the three questions that form this domain, the question score showing a significant change is patients' involvement in decisions about their care, which improved from 73.2 to 73.6.

Building closer relationships: four survey questions, domain score being statistically comparable changing from 84.7 to 84.6

This domain assesses whether doctors or nurses provided information to patients in a way they could understand and whether doctors or nurses spoke about patients as if they weren't there. Of the four questions included in this domain, the question score showing a significant change is

provision of information by doctors to patients in a way they can understand, which decreased from 82.1 to 81.6.

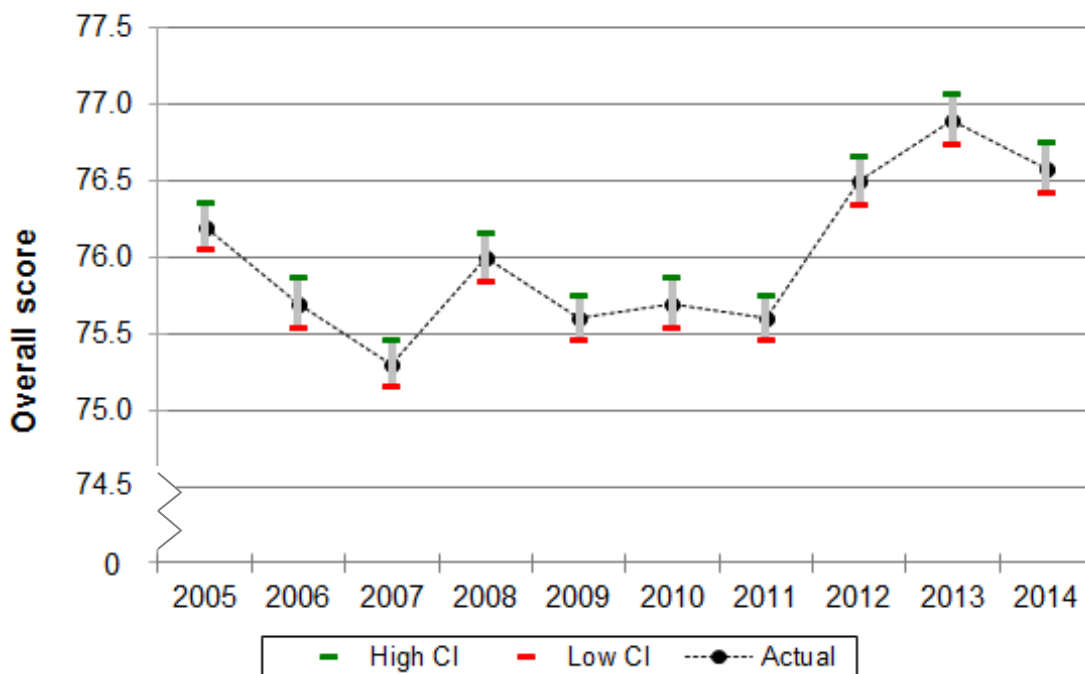
Clean, friendly, comfortable place to be: seven survey questions, domain score being statistically comparable at 80.1

This domain captures feedback on whether patients were disturbed by noise at night, asking patients what they thought about the cleanliness of their hospital room or ward and how patients felt they were treated by staff, including how 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. There has been an improvement to two of the seven question scores used to form this domain: patients increasingly report they are given enough privacy when being examined or treated (score increasing from 94.6 to 94.7) and more patients report being treated with dignity and respect (score increasing from 88.9 to 89.4). The question score with significant deterioration measures patients' experience of being disturbed by noise at night from hospital staff (decreasing from 80.5 to 79.7).

2.5 Trends in the scores

Similar surveys of adult inpatients were also carried out in 2002 and then annually from 2004 to 2014. Figure 1 below plots overall patient experience scores from 2005 to 2014 (note that the graph does not start at zero, so changes over time are exaggerated). There were significant decreases in the overall score between 2005 and 2007, and significant increases between 2007 and 2008. Results for 2009 to 2011 were generally constant followed by a sustained increase between 2011 and 2013. The latest results (2014) show a significant decrease compared to 2013.

Figure 1: Overall patient experience scores for adult inpatient services



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

2.6 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) The overall score 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 Gypsy or Irish Traveller ethnic group is 25 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.

This shows that a number of ethnic groups have significantly higher overall scores compared to the White British group, reflecting more positive experiences. These are: White Irish and White & Black Caribbean.

Conversely, a number of ethnic groups have significantly lower overall scores compared to the White British group, reflecting less positive experiences. These are: Any other White background, Any other mixed background, Indian, Pakistani, Bangladeshi, Arab and Any other ethnic group background.

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

	Overall score		Confidence interval	Number of respondents
White British	76.75		0.18	50950
White Irish	79.69	S	1.17	588
White Gypsy or Irish Traveller	*		*	25
Any other White	75.41	S	1.07	912
White & Black Caribbean	82.10	S	1.78	129
White & Black African	78.09		1.11	52
White & Asian	75.45		2.32	121
Any other mixed background	70.09	S	2.01	56
Indian	74.04	S	1.16	766
Pakistani	72.01	S	1.43	422
Bangladeshi	72.72	S	2.11	81
Chinese	78.50		1.63	120
Any other Asian background	77.02		1.35	175
African	75.54		1.46	353
Caribbean	76.95		1.36	393
Any other Black background	77.14		2.18	39
Arab	72.48	S	4.52	63
Any other ethnic group	70.88	S	1.91	47

Ethnic group is unknown for 3,438 respondents

Notes: Results marked with * are not available due to small sample sizes of less than 30 respondents
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 they do not have a long-standing condition (health status). 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. This shows that patients who do not have a long-standing condition have statistically higher overall scores, reflecting more positive experiences (denoted by **S** in Table 3 below).

Table 3: Overall patient experience scores for patients with and without long-standing conditions, England 2014-15

	Overall score	Confidence Interval	Number of respondents
Long-standing Condition	74.80	0.23	32775
No long-standing Condition	79.22 S	0.26	19674

Health status is unknown for 6,281 respondents

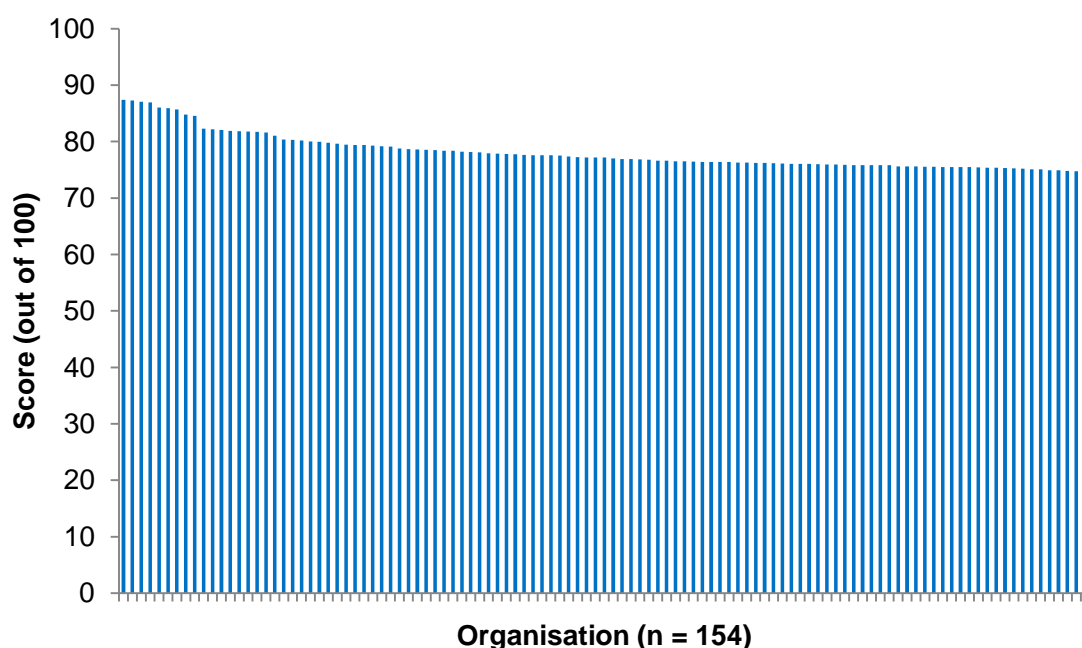
2.7 Variation at NHS organisational level

We need to be cautious when considering these statistics at trust level due to the larger 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 59,000 responses and we can be confident that the true score lies within a small range (in this case, plus or minus 0.17). For trust level data, the total number of responses is on average around 380. At this level, the level of confidence that we can have in the scores can range between plus or minus 3 or 4 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 were 154 trusts who participated in the 2014 survey, all with their own overall scores. Scores range from 67.4 to 87.4, with an average of 76.6. There are 39 trusts with scores that are significantly above the average and 46 with scores that are significantly below the average.

Figure 2: Trust level overall patient experience scores, 2014-15



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 8 or 9 points higher on any other domain as well (formally there is a positive correlation of around 0.85).

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 2013-14 and 2014-15.

Table 3: Number of increased and decreased scores at trust level, 2013-14 to 2014-15

	Increase	Decrease
Overall Scores	7	17
Access & waiting	7	27
Safe, high quality, coordinated care	10	19
Better information, more choice	8	8
Building closer relationships	10	9
Clean, comfortable, friendly place to be	14	13

Note: Changes are based on 154 trusts with comparable data in 2013-14 and 2014-15

The number of organisations with significant changes in each direction across the domains corresponds with the change in the England level scores between 2013-14 and 2014-15. At England level, significant decreases were seen in the Overall Score and the two domains 'Access & Waiting' and 'Safe, High Quality, Coordinated Care'. This is reflected at trust level with more decreases than increases in trust scores overall and in each of the two respective domains. 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/

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 can be affected when trusts have merged in the period between surveys. For example, in July 2014 the Barnet and Chase Farm Hospitals NHS Trust (RVL) formally became part of the Royal Free London NHS Foundation Trust (RAL). These changes can have a small effect on the results of the survey and therefore our England level scores.

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 Adult inpatient 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 were given the choice of sampling from inpatients in June, July or August 2014. Trusts counted back from their chosen month, including every consecutive discharge, until they had selected 850 patients. Fieldwork for the survey took place between September 2014 and January 2015. Five acute trusts did not participate in the survey as they were not eligible for inclusion, either because they were children's trusts or because they treat insufficient numbers of inpatients.

Sample sizes and response rates vary depending on the survey setting and by question. Over 59,000 people responded to the 2014 Adult inpatient survey (a response rate of 47%; in 2013 this was 49%). 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 2014 Adult inpatient survey can be found at:

www.cqc.org.uk/public/reports-surveys-and-reviews/surveys/inpatient-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:

www.nhssurveys.org/surveys/767

5 Overview of survey changes for 2014

Each year minor adjustments are made to the questionnaire in order to fulfil different strategic requirements as well as part of a process of continual improvement.

The 2014 Adult inpatient survey has been subject to minor changes that **do not have an impact on the 'overall patient experience scores'**. Full information about the changes and the evidence base is available in the Survey Development Report, available via the following link:

www.nhssurveys.org/survey/1473

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 the accident and emergency patient experience scores in December 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.

Adult inpatient survey: national scores

	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15		2014-15 95% confidence interval
Access & waiting	83.8	84.9	85.0	84.2	83.8	84.3	84.6	83.8	S	0.20
Safe, high quality, coordinated care	64.9	65.3	64.4	64.6	64.8	65.4	66.1	65.5	S	0.25
Better information, more choice	66.7	67.7	66.8	67.2	67.2	68.2	68.8	68.9		0.28
Building closer relationships	83.0	83.2	82.9	83.0	83.0	84.6	84.7	84.6		0.17
Clean, friendly, comfortable place to be	78.1	79.2	79.1	79.4	79.4	79.8	80.1	80.1		0.15
Inpatient overall patient experience score	75.3	76.0	75.6	75.7	75.6	76.5	76.9	76.6	S	0.17

Source: National Patient Survey Programme

Results marked with an **S** show a statistically significant change from 2013-14 to 2014-15

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	2011-12	2012-13	2012-13		2013-14	
			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	0.40	S
Community mental health overall patient experience score	74.1	74.4	72.2	71.6	0.44	S

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