



Statistical bulletin:  
Overall Patient Experience Scores  
*2016 Emergency Department Survey update*

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## *2016 Emergency Department Survey update*

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# Contents

Contents.....	3
1 Overall Patient Experience Scores: 2016 Emergency Department Survey update.....	4
2 Background.....	5
2.1 Context and interpretation.....	5
2.2 How scores are constructed .....	5
2.3 What is a confidence interval? .....	6
3 What lies beneath the headlines? .....	7
3.1 Domain scores.....	7
3.1.1 Access & waiting: three survey questions, score of 65.1 .....	7
3.1.2 Safe, high quality coordinated care: three survey questions, score of 78.6.....	7
3.1.3 Better information, more choice: four survey questions, score of 77.7 .....	7
3.1.4 Building closer relationships: five survey questions, score of 83.6 .....	7
3.1.5 Clean, comfortable, friendly place to be, four questions, score of 85.7 .....	7
3.2 Question scores.....	8
3.3 Variations in the scores: demographics .....	9
3.4 Variation at NHS organisational level.....	10
4 Feedback.....	11
5 Background notes – The NHS Patient Survey Programme .....	11
6 Overview of survey changes for 2016.....	12
7 Full set of tables: Overall Patient Experience Scores .....	13
8 Annex A – Overall Patient Experience Scores: 2016 Emergency Department Survey update - Scoring regime for 2016 .....	20

# 1 Overall Patient Experience Scores: 2016 Emergency Department Survey update

This publication updates this regular statistical series to include results from the Emergency Department Survey, which surveyed patients aged 16 years or older who attended a Type 1 or Type 3 emergency department during September 2016.

The calculation of the OPES is based only on the results from patients who attended a Type 1<sup>1</sup> emergency department. The sample is based on 137 trusts. Patients were selected using random stratified sampling, by including every consecutive discharge counting back from 30 September until 1,250 patients were selected. Where a Trust had both a Type 1 and a Type 3 department, the sample was split to select 950 patients who used Type 1 services and 300 patients who used Type 3 services. Fieldwork for the survey (the period during which questionnaires were sent out and returned) took place between October 2016 and March 2017.

These statistics use a set of questions from the NHS Patient Survey Programme<sup>2</sup> to produce a set of overall scores that measure patients' views on the care they receive.

NHS England produce separate sets of scores for different NHS services; this update focuses on the emergency department setting. **The next planned update is for the 2017 Community Mental Health Survey, expected in November 2017.**

The Overall Patient Experience Score for NHS emergency department services for 2016-17 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.

The updated scores published in this bulletin are **not comparable** with previous Overall Patient Experience Scores for the Accident and Emergency Survey. This is due to a number of changes in the survey's sampling methodology, including changes to the sampling approach, the sample size and the sampling month. Further detail around this can be found in Section 6.

**Table 1:** Overall Patient Experience Scores: 2016 Emergency Department Survey update, England, 2016-17

Domain	2016-17	95% confidence interval
Access & waiting	65.1	0.23
Safe, high quality, coordinated care	78.6	0.33
Better information, more choice	77.7	0.45
Building closer relationships	83.6	0.23
Clean, comfortable, friendly place to be	85.7	0.23
<b>Overall Patient Experience Score</b>	<b>78.2</b>	<b>0.26</b>

Source: NHS Patient Survey Programme, Care Quality Commission

<sup>1</sup> The analysis also includes Moorfields Eye Hospital, which is the only Trust included in the Survey with a Type 2 department

<sup>2</sup> The NHS 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 update for the Overall Patient Experience Scores.

## 2 Background

### 2.1 Context and interpretation

The Overall Patient Experience Scores use survey data to calculate a measure of patient experience for a number of types of NHS care. This is done using a series of questions (19 questions in the Emergency Department Survey) arranged across five domains, each of which measures one aspect of care:

1. Access & waiting
2. Safe, high quality co-ordinated care
3. Better information, more choice
4. Building closer relationships
5. Clean, comfortable, friendly place to be

Both the overall score and the domains are presented as a score out of 100, calculated by averaging a subset of the scored survey questions. These scores do not translate directly into descriptive words or ratings, but present measures of 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 at least 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 and waiting' than it is at 'information and choice', or that mental health services are 'better' than inpatient services, but the results can be used to look at change over time **where methods have not changed**.

These statistics are 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 Patient Experience 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<sup>3</sup>. For example, for the question 'How long did you wait before you first spoke to a nurse or doctor?' the following scoring applies:

**Table 2:** Example scoring regime for a survey question

Response options	Scoring
0 - 15 minutes	100
16 - 30 minutes	67
31 - 60 minutes	33
More than 60 minutes	0
Don't know / can't remember	(excluded)

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<sup>3</sup> Annex A details the 2016 Emergency Department Survey scoring regime for each of the 19 questions that feed into the five domain scores and the Overall Patient Experience Score.

The scoring mechanism is applied to respondent level results before being standardised to match the 2016 survey profile for age, and gender. Scores are then aggregated up and presented as weighted averages at either trust or England level.

As supporting information, NHS England has published a number of documents to aid interpretation of these statistics, including a '*Methods, reasoning and scope*' methodological statement, which can be found at:

[www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/](http://www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/)

Separately, the Care Quality Commission (CQC) has published a Statistical Release report providing a summary of the underlying survey data, along with all the results for the 2016 Emergency Department Survey, available at:

[www.cqc.org.uk/emergencydepartmentsurvey](http://www.cqc.org.uk/emergencydepartmentsurvey)

### **2.3 What is a confidence interval?**

In these statistics, NHS England has used survey responses from nearly 42,000 patients to estimate the typical experience for all adult patients in NHS emergency 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 Patient Experience Score update for the latest emergency department survey has a confidence interval of plus or minus 0.26 points. This means that the true value is likely to lie in a range from 0.26 points below our estimate to 0.26 points 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.

## 3 What lies beneath the headlines?

### 3.1 Domain scores

The domain scores are calculated by taking the average score for a small subset of scored survey questions. This section assesses the domain scores for 2016-17 with reference to the specific questions that feed into each domain. As described above, higher scores for particular questions or domains do not necessarily refer to 'better' services; see Section 2.1 for more details.

#### 3.1.1 Access & waiting: three survey questions, score of 65.1

This domain captures information about the length of time patients' emergency department visits lasted and how long they waited before interactions with doctors or nurses. The highest scoring question relates to the length of time of each patient's visit to the emergency department lasted, while the lowest scoring question relates to how long patients had to wait before speaking to a nurse or doctor.

#### 3.1.2 Safe, high quality coordinated care: three survey questions, score of 78.6

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. The highest scoring question relates to different staff members giving consistent information to patients, while the lowest scoring question relates to patients being told about danger signals to watch for after they went home.

#### 3.1.3 Better information, more choice: four survey questions, score of 77.7

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. The highest scoring question relates to staff explaining the purpose of medications in a way that patients could understand, while the lowest scoring question relates to staff telling patients about side effects of medications to watch for.

#### 3.1.4 Building closer relationships: five survey questions, score of 83.6

This domain assesses whether doctors or nurses spoke about patients as if they weren't 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. The highest scoring question relates to doctors and nurses avoiding talking about patients as if they weren't there, while the lowest scoring question relates to doctors and nurses discussing anxieties and fears with patients.

#### 3.1.5 Clean, comfortable, friendly place to be, four questions, score of 85.7

This domain assesses the cleanliness of the emergency department 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. The highest scoring question relates to patients being given enough privacy when being examined or treated, while the lowest scoring question relates to whether patients thought hospital staff did everything they could to control their pain.

## 3.2 Question scores

Table 3 presents the question scores for the individual survey questions making up each of the domains

**Table 3:** National average scores for each of the questions making up the OPES domains

Domain	Domain Score
Question	Question Score
<b>Access and waiting</b>	<b>65.1</b>
9 From the time you arrived at the emergency department, how long did you wait before being examined by a doctor or nurse?	63.3
11 Overall, how long did your visit to the emergency department last?	70.0
8 How long did you wait before you first spoke to a nurse or doctor?	61.9
<b>Safe, high quality, coordinated care</b>	<b>78.6</b>
22 Sometimes, a member of staff will say one thing and another will say something quite different. Did this happen to you in the emergency department?	89.3
42 Did a member of staff tell you about what danger signals regarding your illness or treatment to watch for after you went home?	59.4
16 Did you have confidence and trust in the doctors and nurses examining and treating you?	87.1
<b>Better information, more choice</b>	<b>77.7</b>
23 Were you involved as much as you wanted to be in decisions about your care and treatment?	79.1
38 Did a member of staff explain the purpose of the medications you were to take at home in a way you could understand?	92.2
39 Did a member of staff tell you about medication side effects to watch for?	52.8
19 While you were in the emergency department, how much information about your condition or treatment was given to you?	86.4
<b>Building closer relationships</b>	<b>83.6</b>
17 Did doctors or nurses talk to each other about you as if you weren't there?	90.3
12 Did you have enough time to discuss your health or medical problem with the doctor or nurse?	85.2
13 While you were in the emergency department, did a doctor or nurse explain your condition and treatment in a way you could understand?	81.6
14 Did the doctors and nurses listen to what you had to say?	88.7
15 If you had any anxieties or fears about your condition or treatment, did a doctor or nurse discuss them with you?	72.0
<b>Clean, comfortable, friendly place to be</b>	<b>85.7</b>
33 In your opinion, how clean was the emergency department?	86.2
20 Were you given enough privacy when being examined or treated?	90.8
44 Overall, did you feel you were treated with respect and dignity while you were in the emergency department?	89.3
32 Do you think the hospital staff did everything they could to help control your pain?	76.3
<b>Overall</b>	<b>78.2</b>



### 3.3 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, for the 2016-17 scores the number of responses from the White Gypsy or Irish Traveller ethnic group is 28 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 4 below shows the overall score for each ethnic group in the 2016 Emergency Department Survey. 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 & Asian, Any other mixed background, Indian, Pakistani, Bangladeshi, Chinese, Any other Asian background, African, Caribbean and Arab. All these groups have lower scores than White British, reflecting less positive experiences.

**Table 4:** Overall Patient Experience Scores by ethnic group, England, 2016-17

Ethnicity	Overall score		Confidence Interval	Number of respondents
White British	78.7		0.29	35,897
White Irish	80.7		1.20	435
White Gypsy or Irish Traveller	*		*	28
Any other White	74.9	<b>S</b>	1.05	1,187
White & Black Caribbean	77.9		1.47	120
White & Black African	78.0		1.52	67
White & Asian	72.4	<b>S</b>	2.24	114
Any other mixed background	71.8	<b>S</b>	2.60	82
Indian	75.5	<b>S</b>	1.12	584
Pakistani	71.8	<b>S</b>	1.69	352
Bangladeshi	65.9	<b>S</b>	3.37	102
Chinese	69.3	<b>S</b>	1.21	106

Ethnicity	Overall score		Confidence Interval	Number of respondents
Any other Asian Background	74.7	<b>S</b>	1.70	221
African	76.3	<b>S</b>	1.58	384
Caribbean	74.7	<b>S</b>	2.05	286
Any other Black background	75.4		5.23	35
Arab	72.2	<b>S</b>	1.29	76
Any other Ethnic group	73.4		1.80	65

Notes:

*Ethnic group is unknown for 1,800 respondents*

*Results are not applicable for White Gypsy or Irish Traveller as there are too few respondents*

*Results marked **S** are significantly different from White British*

Table 5 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 (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.

The overall scores **are significantly different** for those patients who do and do not report having a long-standing condition.

**Table 5:** Overall Patient Experience Scores by health status, England, 2016-17

Health Status	Overall score		Confidence interval	Number of respondents
Long-standing Condition	76.7		0.42	20,112
No long-standing condition	79.7	<b>S</b>	0.35	18,719

Notes:

*Health status is unknown for 3,110 respondents.*

*Results marked **S** are significantly different to the group of patients with long-standing conditions*

### 3.4 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, the scores 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 0.26). For trust level data, we are typically looking at around 300 responses and we can only have confidence that scores are accurate within a range of plus or minus around 3 percentage points.

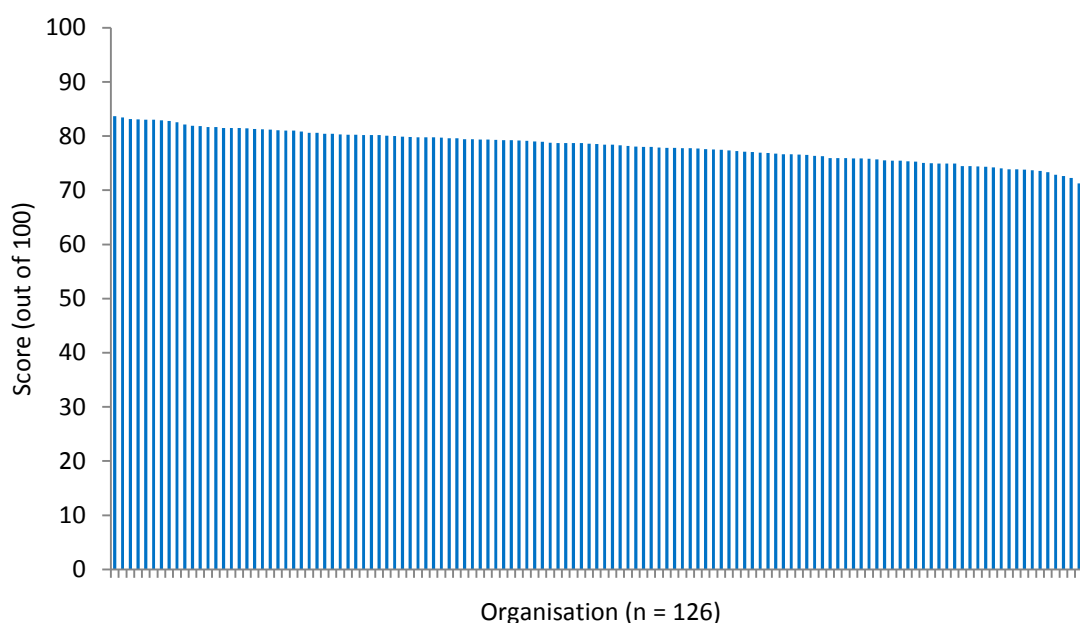
This means it can be difficult to assess whether scores for an individual trust are significantly different from the average.

Figure 1 shows the Overall Patient Experience Score for each trust, with the higher scores towards the left and the lower towards the right. There are 126 trusts in 2016 with overall scores<sup>4</sup>. Scores range from 71.1 to 83.7, with an average of 78.2. There are 24 trusts with scores that are significantly above the average and 28 with scores that are significantly below

<sup>4</sup> Where a trust has fewer 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, 137 trusts took part in the survey for 2016, 11 trusts had fewer than 30 responses to one or more survey questions used to construct the Overall Patient Experience Scores.

the average.

**Figure 1:** Trust level Overall Patient Experience Scores, England, 2016-17



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).

Results at trust level are published in our diagnostic tool, which is available at: [www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/](http://www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/).

## 4 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](mailto:England.feedback-data@nhs.net)

## 5 Background notes – The NHS Patient Survey Programme

The Emergency Department Survey is part of a wider programme of NHS patient surveys, which cover a range of topics including inpatients, maternity and children's inpatient and day-case services, emergency department services and community mental health. 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 the 2016 Emergency Department Survey was carried out between October 2016 and March 2017. Timings depend on the survey setting and are defined by CQC as part of the survey programme. Patients were eligible for the 2016 Emergency Department Survey if

they were aged 16 years or older and were not staying in hospital at the time patients were sampled. Patients visited the emergency department during September 2016 (previously, patients were eligible to complete the A&E survey if they had visited A&E in either January, February or March).

Sample sizes and response rates vary depending on the survey setting and by question. Over 45,000 people responded to the Emergency Department survey (a response rate of 28% for users of Type 1 services, and 25% for users of Type 3 services<sup>5</sup>). 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 Emergency Department survey can be found at:

[www.cqc.org.uk/emergencydepartmentsurvey](http://www.cqc.org.uk/emergencydepartmentsurvey)

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/1108>

## **6 Overview of survey changes for 2016**

The 2016 Emergency Department Survey has been subject to changes that mean the Overall Patient Experience Scores are not comparable with those calculated from previous Accident and Emergency Surveys. Some changes have been made to the questionnaire itself, but the larger changes are to the sampling strategy and the analysis of the survey results. Full details can be found in the Survey Development report:

[www.nhssurveys.org/surveys/997](http://www.nhssurveys.org/surveys/997)

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<sup>5</sup> Please note: the 'adjusted' response rate is reported. The adjusted base is calculated by subtracting the number of questionnaires returned as undeliverable or, if someone had died, from the total number of questionnaires sent out. The adjusted response rate is then calculated by dividing the number of returned useable questionnaires by the adjusted base.

## 7 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 NHS 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 adult inpatient experience scores in May 2017.

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.

## Emergency Department Survey: national scores

Table 1

Domain	2016-17	95% confidence interval (2016-17)
Access & waiting <sup>1</sup>	65.1	0.23
Safe, high quality, coordinated care	78.6	0.33
Better information, more choice	77.7	0.45
Building closer relationships	83.6	0.23
Clean, comfortable, friendly place to be	85.7	0.23
<b>Emergency department overall patient experience score</b>	<b>78.2</b>	<b>0.26</b>

Source: NHS Patient Survey Programme

Due to changes to the 2016 Emergency Department Survey, the scores for 2016-17 are **not comparable** with previous years. Results from the 2004-05 to 2014-15 Accident & Emergency Department Survey are presented in Table 2 below.

**Table 2**

Domain	2004-05	2008-09	2012-13	2012-13 adjusted <sup>2</sup>	2014-15
Access & waiting <sup>1</sup>	69.4	66.6	64.3	67.0	67.7
Safe, high quality, coordinated care	74.7	75.1	74.5	74.5	76.0
Better information, more choice	73.5	74.4	74.8	74.8	75.8
Building closer relationships	80.4	81.3	80.8	80.8	81.9
Clean, comfortable, friendly place to be	81.0	81.4	82.2	82.2	84.2
<b>Accident and emergency overall patient experience score</b>	<b>75.8</b>	<b>75.7</b>	<b>75.4</b>	<b>75.9</b>	<b>77.2</b>

Source: NHS Patient Survey Programme

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/](http://www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/)

## Adult Inpatient Survey: national scores

Domain	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17		95% confidence interval (2016-17)
Access & waiting	83.8	84.9	85.0	84.2	83.8	84.3	84.6	83.8	84.5	82.9	<b>S</b>	0.17
Safe, high quality, coordinated care	64.9	65.3	64.4	64.6	64.8	65.4	66.1	65.5	66.3	66.1		0.21
Better information, more choice	66.7	67.7	66.8	67.2	67.2	68.2	68.8	68.9	69.3	68.0	<b>S</b>	0.24
Building closer relationships	83.0	83.2	82.9	83.0	83.0	84.6	84.7	84.6	85.4	85.5		0.14
Clean, comfortable, friendly place to be	78.1	79.2	79.1	79.4	79.4	79.8	80.1	80.1	81.1	81.1		0.12
<b>Inpatient overall patient experience score</b>	<b>75.3</b>	<b>76.0</b>	<b>75.6</b>	<b>75.7</b>	<b>75.6</b>	<b>76.5</b>	<b>76.9</b>	<b>76.6</b>	<b>77.3</b>	<b>76.7</b>	<b>S</b>	<b>0.14</b>

Source: NHS Patient Survey Programme

Results marked with an **S** show a statistically significant change from 2015-16 to 2016-17.

### Notes:

1. The 2015-16 scores have been updated in this publication to exclude three trusts (RAP, RD8 and RMC) where a historical sampling error was discovered after the 2015 publication, this is in line with revisions made to the 2015 Inpatient Survey by CQC.

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/](http://www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/)



## Outpatient Survey: national scores

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

Source: NHS 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 (questions 1A in 2002-03 and questions 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/](http://www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/)

## Community Mental Health Survey: national scores

Table 1

Domain	2014-15 <sup>1</sup>	2015-16 <sup>2</sup>	2016-17	95% confidence interval (2016-17)
Access & waiting	82.2	81.9	82.4	0.53
Safe, high quality, coordinated care	71.4	70.3	71.1	0.69
Better information, more choice	71.5	70.4	70.8	0.62
Building closer relationships	78.2	76.2	76.7	0.49
<b>Community mental health overall patient experience score</b>	<b>75.8</b>	<b>74.7</b>	<b>75.2</b>	<b>0.48</b>

Source: NHS Patient Survey Programme

No results show a statistically significant change from 2015-16 to 2016-17

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.

Notes:

1. Details of the 2014-15 survey changes are available in the Survey Development Report published by the Coordination Centre at: <http://www.nhssurveys.org/surveys/750>. Information about the resulting changes to the Overall Patient Experience Score for 2014-15 has been published by NHS England and is available at: <http://www.england.nhs.uk/statistics/2014/09/18/overall-patient-experience-scores-2014-community-mental-health-survey>.
2. 2015-16 data has been revised since the last publication in line with revisions made to the 2015 Community Mental Health Survey by CQC after an error was uncovered, further details are available in the section 7 of the Overall Patient Experience Scores: 2016 Community Mental Health Survey at: <https://www.england.nhs.uk/statistics/2016/11/15/overall-patient-experience-scores-2016-community-mental-health-survey-update/>

**Table 2**

Domain	2011-12	2012-13	2012-13 adjusted <sup>1</sup>	2013-14
Access & waiting	71.1	72.4	72.4	72.4
Safe, high quality, coordinated care	72.1	71.3	68.0	67.4
Better information, more choice	68.3	69.1	65.8	65.4
Building closer relationships	84.7	84.7	82.4	81.1
<b>Community mental health overall patient experience score</b>	<b>74.1</b>	<b>74.4</b>	<b>72.2</b>	<b>71.6</b>

Source: National Patient Survey Programme

Notes:

1. The scoring regime was changed in 2013-14 to remove CPA-based scoring on certain questions. Due to this change, the 2013-14 scores are 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](http://www.nhssurveys.org/Filestore/MH13/MH13_Recommendation_to_discontinue_CPA-differentiated_scoring_v1.pdf)

Over time there have been a number of changes made to the survey including revisions to the eligible age range and major developments to revise the methodology and the questionnaire content which affect historical comparability, for further details please see: <http://nhssurveys.org/surveys/872>

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/](http://www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/)

## 8 Annex A – Overall Patient Experience Scores: 2016 Emergency Department Survey update - Scoring regime for 2016

The table below presents the 2016 Emergency Department Survey question number and wording together with the scoring regime for each of the 19 questions that feed into the five domain scores and the Overall Patient Experience Score. Responses scored as 'M' are interpreted as missing.

No.	2016 Question Wording	Scoring (Response=Score)
<b>Domain: Access &amp; waiting</b>		
9	From the time you first arrived, how long did you wait before being examined by a doctor or nurse?	1=100 2=80 3=60 4=40 5=20 6=0 7=M 8=M
11	Overall, how long did your visit to the emergency department last?	1=100 2=100 3=80 4=60 5=40 6=20 7=0 8=0 9=M
8	How long did you wait before you first spoke to a nurse or doctor?	1=100 2=67 3=33 4=0 5=M
<b>Domain: Safe, high quality, co-ordinated care</b>		
22	Sometimes, a member of staff will say one thing and another will say something quite different. Did this happen to you in the emergency department?	1=0 2=50 3=100
42	Did a member of staff tell you about what danger signals regarding your illness or treatment to watch for after you went home?	1=100 2=50 3=0 4=M
16	Did you have confidence and trust in the doctors and nurses examining and treating you?	1=100 2=50 3=0
<b>Domain: Better information, more choice</b>		
23	Were you involved as much as you wanted to be in decisions about your care and treatment?	1=100 2=50 3=0 4=M
38	Did a member of staff explain the purpose of the medications you were to take at home in a way you could understand?	1=100 2=50 3=0 4=M

39	Did a member of staff tell you about medication side effects to watch for?	1=100 2=50 3=0 4=M
19	While you were in the emergency department, how much information about your condition or treatment was given to you?	1=50 2=100 3=50 4=0
<b>Domain: Building closer relationships</b>		
17	Did doctors or nurses talk to each other about you as if you weren't there?	1=0 2=50 3=100
12	Did you have enough time to discuss your health or medical problem with the doctor or nurse?	1=100 2=50 3=0 4=M
13	While you were in the emergency department, did a doctor or nurse explain your condition and treatment in a way you could understand?	1=100 2=50 3=0 4=M
14	Did the doctors and nurses listen to what you had to say?	1=100 2=50 3=0
15	If you had any anxieties or fears about your condition or treatment, did a doctor or nurse discuss them with you?	1=100 2=50 3=0 4=M
<b>Domain: Clean, comfortable, friendly place to be</b>		
33	In your opinion, how clean was the emergency department?	1=100 2=67 3=33 4=0 5=M
20	Were you given enough privacy when being examined or treated?	1=100 2=50 3=0
44	Overall, did you feel you were treated with respect and dignity while you were in the emergency department?	1=100 2=50 3=0
32	Do you think the hospital staff did everything they could to help control your pain?	1=100 2=50 3=0 4=M