



Statistical bulletin: Overall Patient Experience Scores

2018 Adult Inpatient Survey Update

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Prepared by: NHS England Analytical Team (Surveys Team, Analytical Services)

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1 Overall Patient Experience Scores: 2018 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. These statistics use a set of questions from the NHS Patient Survey Programme¹ to produce a set of composite index scores, called Overall Patient Experience Scores, which measure patient views on the care they receive.

NHS England produces separate scores to measure four different NHS services: inpatients, outpatients, community mental health and accident & emergency. This update focuses on the adult inpatient setting. **The next planned update will be for the 2018 Urgent and Emergency Care Survey, expected in October 2019.**

The Overall Patient Experience Score for NHS adult inpatient services for 2018-19 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 2.2 below.

Overall patient experience of adult inpatient services **decreased** between 2017-18 and 2018-19, down from **77.2 to 76.2 out of 100**. All five of the domain scores show a decline in score compared to 2017-18.

Table 1: Overall Patient Experience Scores: 2018 Adult Inpatient Survey update, England, 2014-15 to 2018-19

Domain	2014-15	2015-16	2016-17	2017-18 ²	2018-19		95% Confidence interval (2018-19)
Access & waiting	83.8	84.5	82.9	83.5	82.3	S	0.20
Safe, high quality, coordinated care	65.5	66.3	66.1	66.8	65.8	S	0.22
Better information, more choice	68.9	69.3	68.0	68.6	67.3	S	0.26
Building closer relationships	84.6	85.4	85.5	85.8	85.0	S	0.15
Clean, comfortable, friendly place to be	80.1	81.1	81.1	81.4	80.8	S	0.13
Overall patient experience score	76.6	77.3	76.7	77.2	76.2	S	0.15

Source: NHS Patient Survey Programme, Care Quality Commission

Further details of the methodology can be found in the methodology paper at: <http://www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/>. The full set of tables is shown at the end of this publication.

Scores in 2018-19 marked with S are significantly different to the 2017-18 score.

The survey is based on a random sample of patients from 144 trusts who received inpatient care during July 2018 by including every consecutive discharge counting back from 31 July until 1,250 patients were selected³. Fieldwork for the survey (the period during which questionnaires were sent out and returned) took place between August 2018 and January 2019.

¹ 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 The Safe, high quality, coordinated care domain as well as the overall patient experience score for 2017-18 have been revised. A printing error affected 27 participating trusts in 2017-18, resulting in data being excluded for one safe, high quality, coordinated care question. This domain and the overall patient experience score have been calculated based on the remaining 121 participating trusts.

³ A small number of specialist trusts have smaller sample sizes as they have relatively low throughputs of patients.

2 Background

2.1 Context and interpretation

The question that the Overall Patient Experience Scores seek to answer is “*has patient experience changed over time?*”

This is done using a series of questions (20 in the case of the Adult Inpatient Survey) arranged across five domains, each of which measures one aspect of care:

1. Access & waiting
2. Safe, high quality, coordinated 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. The scores represent the extent to which the patient’s experience could be improved. A score of 0 reflects considerable scope for improvement, whereas a score of 100 refers to the most positive patient experience. Where there are a number of response options, they are placed at equal intervals on the scale.

Scores for **different aspects of care, or for different service settings, cannot be directly compared**. 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 inpatient 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

The England level domain scores are an average of the trust level 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 the trust level question scores by assigning each patient’s question response option with a ‘score’ between 0 and 100 (where higher scores reflect better reported experience) and calculating the average score for each question⁴ for each trust. 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

⁴ Annex A details the 2018 Adult Inpatient Survey scoring regime for each of the 20 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 2018 survey profile for age and gender. Weighted scores are then aggregated up to trust level to calculate trust scores, and the average of the trust scores is used to calculate the England level score, taking into account the varying trust responses rates.

The Care Quality Commission (CQC) has published a Statistical Release report presenting the underlying survey data, along with all the results for the 2018 Adult Inpatient Survey, and is available at the following link:

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

NHS England has published a number of supporting documents to aid interpretation of the Overall Patient Experience Score 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 76,083 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 Patient Experience Score update for the 2018 Adult Inpatient Survey has a confidence interval of plus or minus 0.15 points. This means that the true value is likely to lie in a range from 0.15 points below our estimate of 76.2 to 0.15 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?

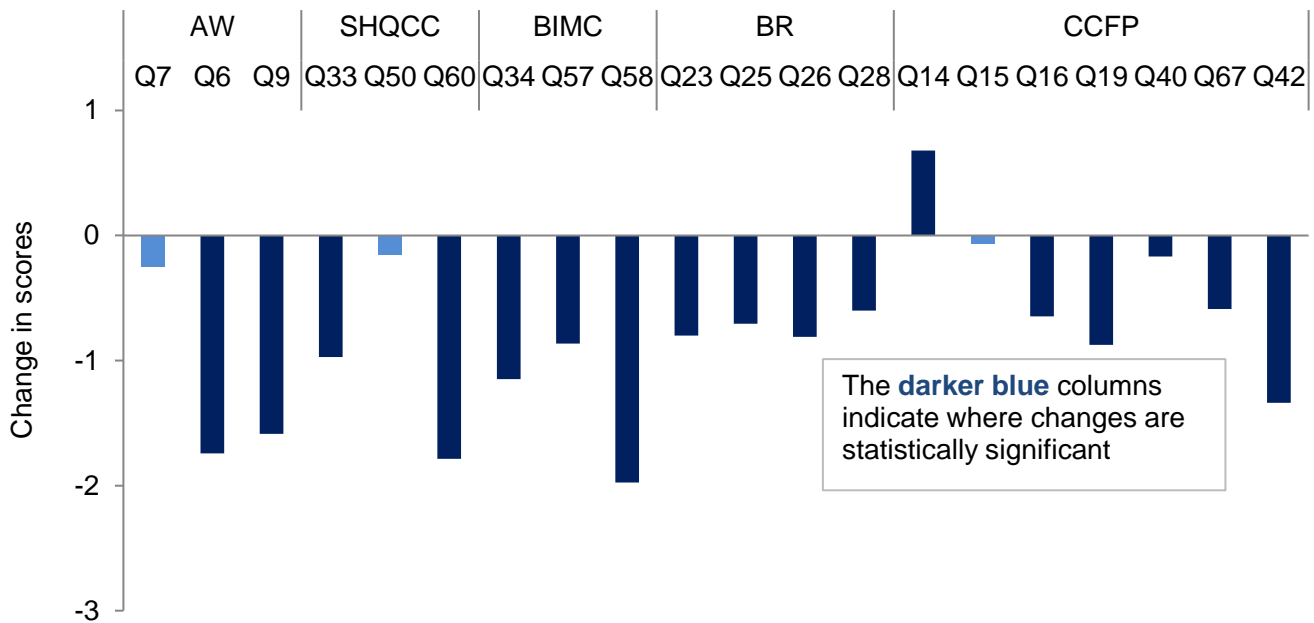
3.1 Domain scores

The domain scores are calculated by taking the average score for a small subset of scored survey questions. This section compares the domain scores in 2017-18 to those in 2018-19, with reference to the specific questions that feed into each domain.

Figure 1 below presents the difference in the question scores between 2017-18 and 2018-19.

The **majority (19 out of 20) of questions have shown a decrease** in scores from 2017-18 to 2018-19, with all five domains also showing an overall decrease.

Figure 1: Change in question scores from 2017-18 to 2018-19, England



3.1.1 Access & waiting

Three survey questions, domain score significantly decreasing from 83.5 to 82.3

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. For this domain, two questions have shown a significant decrease.

- Patients' reporting of being on the waiting list a long time before their admission to hospital (score decreasing from 81.9 to 80.1).
- Patients reported waiting a long time before being allocated a bed or ward (score decreasing from 77.0 to 75.4).

3.1.2 Safe, high quality coordinated care

Three survey questions, domain score significantly decreasing from 66.8 to 65.8

This domain includes questions about whether patients were given consistent messages by different members of staff and whether there were delays in discharge from hospital. Two questions in this domain have shown a significant decrease.

- More patients reported being given inconsistent messages from staff (score decreasing from 81.5 to 80.5).
- Fewer patients reported being told about danger signals to be aware of after discharge (score decreasing from 54.9 to 53.1).

3.1.3 Better information, more choice

Three survey questions, domain score significantly decreasing from 68.6 to 67.3

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. All three questions that form this domain have shown a significant decrease in scores.

- Fewer patients were satisfied with their involvement in decisions about their care and treatment (score decreasing from 74.0 to 72.8).
- Fewer patients received an explanation of the purpose of the medications they were to take at home (score decreasing from 83.3 to 82.4).
- Fewer patients reported being told about medication side effects to watch for at home (score decreasing from 48.5 to 46.5).

3.1.4 Building closer relationships

Four survey questions, domain score significantly decreasing from 85.8 to 85.0

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. All four of the questions included in this domain significantly decreased in score.

- Fewer health professionals gave information to patients in a way they could understand (for doctors the score decreased from 82.7 to 81.9 and for nurses the score decreased from 83.6 to 82.8).
- More health professionals spoke in front of patients as if they weren't there (for doctors the score decreased from 86.8 to 86.1 and for nurses the score decreased from 90.0 to 89.4).

3.1.5 Clean, friendly, comfortable place to be

Seven survey questions, domain score significantly decreasing from 81.4 to 80.8

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 a significant increase in one of the questions and a significant decrease in five of the seven question scores.

- Fewer patients were disturbed by noise at night from other patients (score increasing from 62.4 to 63.1)
- Patients' opinions of cleanliness of the room or ward declined (score decreasing from 89.8 to 89.1)
- Patient's rating of hospital food has decreased from 57.8 to 57.0
- Fewer patients reported being given enough privacy when being examined or treated (score decreasing from 95.0 to 94.8)
- Fewer patients felt the hospital staff did everything they could to help control their pain (score decreasing from 83.2 to 81.9).

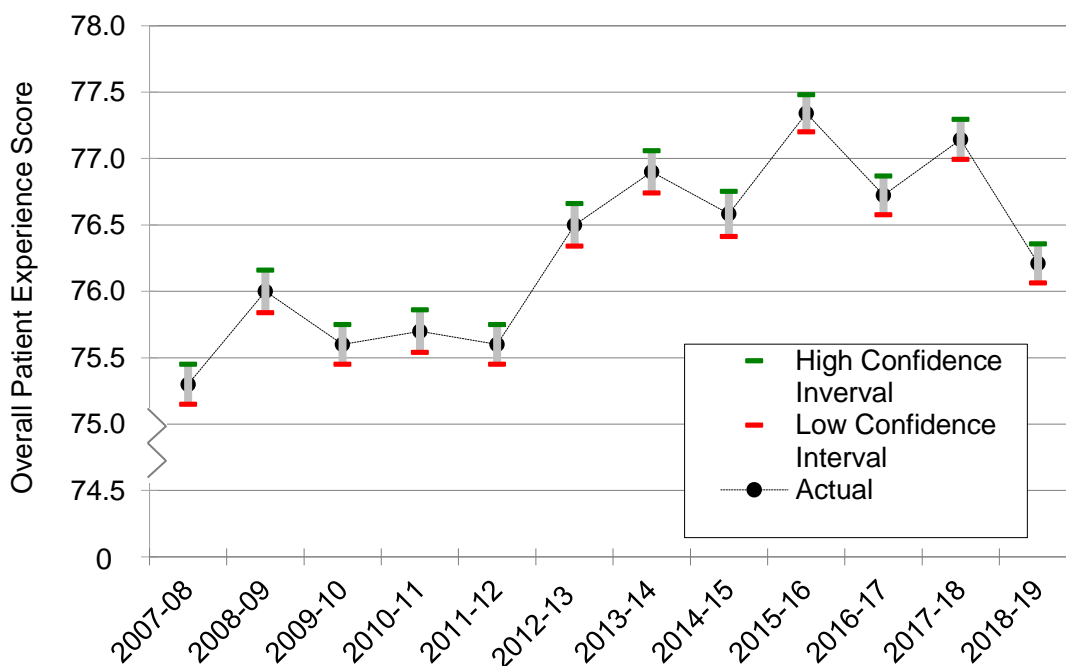
- Patients' reporting of whether they were treated with respect and dignity decreased (score decreasing from 90.8 to 90.2)

3.2 Trends in the scores

Similar surveys of adult inpatients were also carried out in 2002 and then annually from 2004 to 2017. Figure 2 below plots the overall patient experience scores from 2007-08 to 2018-19 (note that the graph does not start at zero, therefore the change over time is exaggerated).

The overall score shows a significant increase from 2007-08 to a peak in 2008-09 before decreasing the following year and then remaining stable to 2011-12. There were sustained increases between 2011-12 and 2013-14, then a significant decrease in 2014-15. Since 2014-15 the score has fluctuated with the latest results for 2018-19 showing a significant decrease compared to 2017-18. The latest score is at its lowest level since 2011-12.

Figure 2: Overall Patient Experience Scores: 2018 Adult Inpatient Survey update, England, 2007-08 to 2018-19



The chart shows Overall Patient Experience Scores with associated 95% confidence intervals.

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:

- 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.
- 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 group is 48 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 2018 Adult Inpatient Survey, together with confidence intervals for each ethnic group's overall score. 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 the White Irish and African ethnic groups have significantly higher overall scores compared to the White British group, reflecting more positive experiences.

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

Table 2: Overall Patient Experience Scores for the Adult Inpatient Survey by ethnic group, England 2018-19

Ethnic group	Overall score		Confidence interval	Number of respondents
White British	76.45		0.16	65,482
Any other Black background	80.40		1.77	73
White Irish	79.61	S	1.03	669
African	78.80	S	1.28	532
Bangladeshi	77.76		1.98	133
Any other Asian background	77.13		1.39	344
Arab	76.87		1.99	70
Any other mixed background	76.74		1.23	122
Chinese	76.65		1.21	187
Any other White	76.28		0.88	1,504
White Gypsy or Irish Traveller	75.80		2.10	48
Caribbean	75.34		1.14	508
Indian	74.73	S	0.92	1,021
White & Black African	74.27		2.78	91
White & Asian	74.21	S	1.60	234
White & Black Caribbean	73.83	S	2.05	184
Any other ethnic group	73.00	S	2.39	136
Pakistani	72.04	S	1.30	583

Ethnic group is unknown for 4,162 respondents

Results marked with **S** are significantly different from the White British group

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). This shows that patients who do not have a long-standing condition have higher overall scores, reflecting more positive experiences.

The way in which patients are asked about their health status has changed slightly in the 2017 survey, so results from this should not be compared to previous surveys.

Table 3: Overall Patient Experience Scores for the Adult Inpatient Survey by health status, England 2018-19

Health status	Overall score		Confidence interval	Number of respondents
Long-standing condition	73.76		0.21	41,884
No long-standing condition	79.83	S	0.25	21,667

Health status is unknown for 12,532 respondents

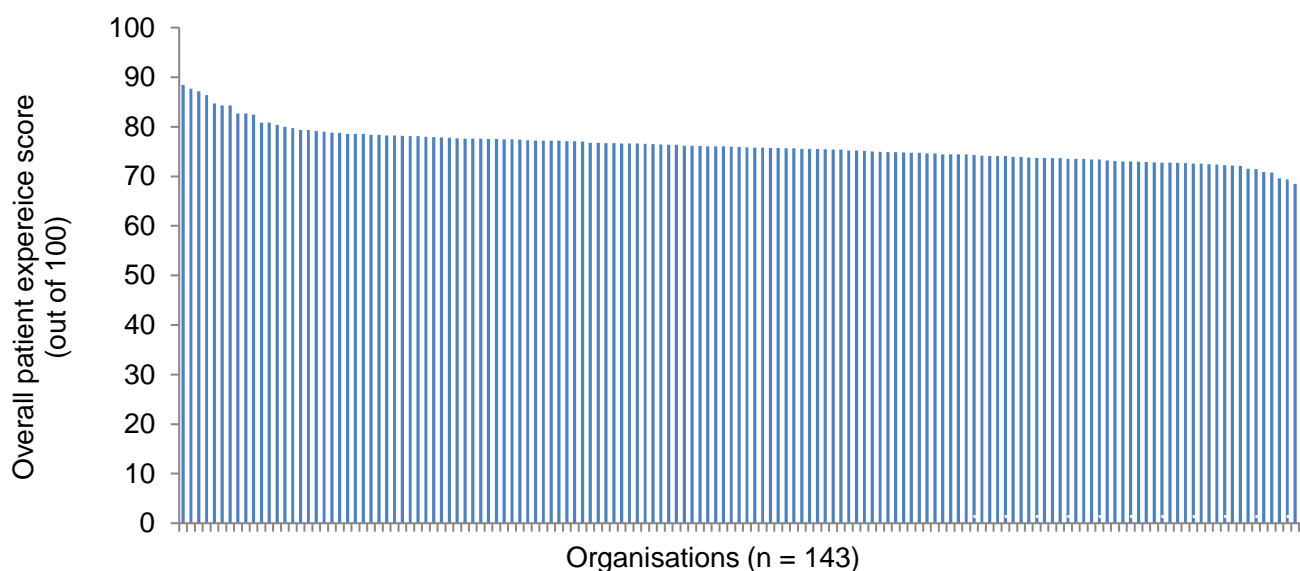
Results marked with **S** are significantly different from the group of patients with long-standing health conditions.

3.4 Variation at NHS organisation 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 a national level, results are based on 76,083 responses and we can be confident that the true Overall Patient Experience Score lies within a small range (in this case, plus or minus 0.15). For trust level data, the total number of responses is on average around 528. At this level, the level of confidence that we can have in the scores can range up to plus or minus 4 points, depending on the trust.

Figure 3 shows the Overall Patient Experience Score for each trust, with the higher scores towards the left and the lower towards the right. There were 143⁵ trusts who participated in the 2018 survey, all with their own overall scores. Scores range from 68.5.8 to 88.4, with an average score of 76.2.

Figure 3: Trust level Overall Patient Experience Scores, England, 2018-19



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.

⁵ 144 trusts participated in the survey, one trust had data excluded for a number of questions included in the calculation of the overall patient experience score, therefore only 143 trusts have a score in 2018-19.

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 4, below, shows the number of NHS trusts that recorded significant increases or decreases in their overall and domain scores between 2017-18 and 2018-19, this is based on a comparison of 130⁶ out of the of the 144 participating trusts in 2018-19⁷.

Table 4: Trust level Overall Patient Experience Scores: Number of significantly increased and decreased scores at trust level, 2017-18 to 2018-19

	Increase	Decrease
Overall Scores	0	18
Access & waiting	10	33
Safe, high quality, coordinated care	3	10
Better information, more choice	41	15
Building closer relationships	4	25
Clean, comfortable, friendly place to be	4	21

The large number of decreases at trust level (as shown in Table 4) in both the overall scores and the domain scores reflect the decreases at the England level. 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 and vice versa.

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 changes to trusts

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 or changed in the period between surveys. These changes can have a small effect on the results of the survey and therefore our England level scores. Between the 2017-18 and 2018-19 survey there has been 5 trust mergers:

- University Hospital Birmingham NHS Foundation Trust (RRK) retaining the trust code (RRK) has acquired Heart of England NHS Foundation Trust (RR1).
- University Hospital of South Manchester NHS Foundation Trust (RM2) and Central Manchester University Hospital NHS Foundation Trust (RW3) have merged to become Manchester University NHS Foundation Trust (R0A).
- Colchester Hospital University NHS Foundation Trust (RDE) and The Ipswich Hospital NHS Trust (RGQ) have merged to become East Suffolk and North Essex NHS Foundation Trust (RDE)
- The Clatterbridge Cancer Centre (REN) – has taken on additional services from the Royal Liverpool University Hospital.
- Peterborough and Stamford Hospitals NHS Foundation Trust (RGN) and Hinchingsbrooke Healthcare NHS Trust (RQQ) have merged to become North West Anglia NHS Foundation Trust (RGN)

⁶ Due to printing errors in 2017-18, a number of trusts had data excluded for one question from the Safe, high quality, coordinated care domain. Hence for this domain as well as the overall patient experience score this is based on a comparison of only 106 trusts.

⁷130 of the 144 participating trusts were comparable between 2017-18 and 2018-19.

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

5 Background notes – The NHS Patient Survey Programme

The Adult Inpatient Survey is part of a wider programme of NHS patient surveys, which covers a range of topics including maternity, children's inpatient and day-case services, A&E (accident and emergency department) 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.

5.1 Background to the Adult Inpatient Survey

The Adult Inpatient Survey has been running annually since 2004. 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.

Patients were eligible for the 2018 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. Fieldwork for the survey took place between August 2018 and January 2019.

In 2018, the size of the patient samples drawn by participating trusts is 1,250, the same as in 2017. The sample month was July, so all trusts must draw their sample of 1,250 from patients discharged in July 2017. Trusts selected a random sample of patients counting back from 31 July until they had selected 1,250 patients (a small number of specialist trusts have smaller sample sizes as they have relatively low throughputs of patients).

Sample sizes and response rates vary depending on the survey setting and by question. The 2018 Adult Inpatient Survey involved 144⁸ NHS acute and NHS foundation trusts in England, who sent questionnaires to a total of 178,681 patients. Responses were received from 76,668 patients, a response rate of 45%⁹ (an increase from 41% in 2017).

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 2018 Adult Inpatient Survey can be found at:

www.cqc.org.uk/inpatientsurvey

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/1225>

⁸ There were 145 trusts that participated but one trust was excluded due to an error in the mailing of the questionnaire.

⁹ 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.

5.2 Overview of changes for 2018

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

The 2018 inpatient questionnaire is largely the same as the 2017 questionnaire, with two new questions added and one question removed.

The minor changes to the 2018 Adult Inpatient Survey 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:

<http://www.nhssurveys.org/survey/2008>

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 for the 2018 Adult Inpatient Survey, the last update was the Community Mental Health Survey update in November 2018.

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	2015-16	2016-17	2017-18	2018-19	S	95% confidence interval (2018-19)
Access & waiting	83.8	84.9	85.0	84.2	83.8	84.3	84.6	83.8	84.5	82.9	83.5	82.3	S	0.20
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	66.8	65.8	S	0.22
Better information, more choice	66.7	67.7	66.8	67.2	67.2	68.2	68.8	68.9	69.3	68.0	68.6	67.3	S	0.26
Building closer relationships	83.0	83.2	82.9	83.0	83.0	84.6	84.7	84.6	85.4	85.5	85.8	85.0	S	0.15
Clean, friendly, comfortable place to be	78.1	79.2	79.1	79.4	79.4	79.8	80.1	80.1	81.1	81.1	81.4	80.8	S	0.13
Inpatient overall patient experience score	75.3	76.0	75.6	75.7	75.6	76.5	76.9	76.6	77.3	76.7	77.2	76.2	S	0.15

Source: National Patient Survey Programme

Notes:

1. In 2018-19 one trust had data excluded from two questions from the Access & waiting domain and one question from the Building closer relationships domain due to multiple errors in the printed survey. For the affected questions, domain and overall patient experience score, the scores are based on the remaining 143 trusts.
2. In 2017-18 there was a printing error on the survey affecting 27 trusts which resulted in data being excluded for these trusts for one question from the Safe, high quality, coordinated care domain. For this question, the domain and the overall patient experience score, the scores are calculated based on the remaining 121 trusts.

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/

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: 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 (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 scores are adjusted to allow for direct comparison with 2011-12.

Details of the methodology can be found in the accompanying overall patient experience score 'Methods, Reasoning and Scope' guidance at

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

Emergency department survey: national scores

	2016-17	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, friendly, comfortable place to be	85.7	0.23
Accident and Emergency Overall Patient Experience Score	78.2	0.26

Source: NHS Patient Survey Programme

Notes: The 2016-17 Emergency Department scores 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.

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	0.22
Safe, high quality, coordinated care	74.7	75.1	74.5	74.5	76.0	0.35
Better information, more choice	73.5	74.4	74.8	74.8	75.8	0.47
Building closer relationships	80.4	81.3	80.8	80.8	81.9	0.25
Clean, friendly, comfortable place to be	81.0	81.4	82.2	82.2	84.2	0.24
Accident and Emergency Overall Patient Experience Score	75.8	75.7	75.4	75.9	77.2	0.28

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 'Methods, Reasoning and Scope' guidance at www.england.nhs.uk/statistics/statistical-work-areas/pat-exp/

Community Mental Health Survey: national scores (2014-15 to 2018-19 comparable domain)

Domain	2014-15 ¹	2015-16 ²	2016-17	2017-18	2018-19		2018-19 95% confidence interval
Access & waiting	-	-	-	-	83.5		0.53
Safe, high quality, coordinated care	-	-	-	-	69.7		0.70
Better information, more choice	-	-	-	-	69.2		0.64
Building closer relationships	78.2	76.2	76.7	76.2	74.9	S	0.51
Community Mental Health Overall Patient Experience Score	-	-	-	-	74.3		0.49

Source: NHS Patient Survey Programme

Results marked with an **S** show a statistically significant change from 2017-18 to 2018-19.

Some questions from the 'Access & waiting', 'Safe, high quality, coordinated care' and 'Better information, more choice' domains are not comparable to previous years due to question changes in the survey. Therefore, these domain scores as well as the overall patient experience score are also not comparable to previous years. Full scores for all domains in previous years are provided in the following table: Community Mental Health Survey: national scores (2014-15 to 2017-18).

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

Community Mental Health Survey: national scores (2014-15 to 2017-18)

Domain	2014-15	2015-16 ¹	2016-17	2017-18
Access & waiting	82.2	81.9	82.4	83.7
Safe, high quality, coordinated care	71.4	70.3	71.1	70.3
Better information, more choice	71.5	70.4	70.8	70.6
Building closer relationships	78.2	76.2	76.7	76.2
Community Mental Health Overall Patient Experience Score	75.8	74.7	75.2	75.2

Source: NHS Patient Survey Programme

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

Details of the 2014-15 survey changes are available in the Development Report published by the Coordination Centre at:

<http://www.nhssurveys.org/surveys/750>

Information about the resulting changes to the overall patient experience scores 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>

Notes: 1. 2015-16 data was revised in 2016 in line with revisions made to the 2015 Community Mental Health Survey by CQC after an error was uncovered.

Community Mental Health Survey: national scores (2011-12 to 2013-14)

Domain	2011-12	2012-13	2012-13 adjusted ¹	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
Community Mental Health Overall Patient Experience Score	74.1	74.4	72.2	71.6

Source: NHS 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

2. 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://www.nhssurveys.org/surveys/872>

7 Annex A – Overall Patient Experience Scores: 2018 Adult Inpatient Survey update - Scoring regime for 2018-19

The table below presents the 2018 Adult Inpatient 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.

No.	2017 Question Wording	Scoring
Domain: Access & waiting		
6	How do you feel about the length of time you were on the waiting list before your admission to hospital?	1=100 2=50 3=0
7	Was your admission date changed by the hospital?	1=100 2=67 3=33 4=0
9	From the time you arrived at the hospital did you feel that you had to wait a long time to get to a bed on a ward?	1=0 2=50 3=100
Domain: Clean, comfortable, friendly place to be		
14	Were you ever bothered by noise at night from other patients?	1=0 2=100
15	Were you ever bothered by noise at night from hospital staff?	1=0 2=100
16	In your opinion, how clean was the hospital room or ward that you were in?	1=100 2=67 3=33 4=0
19	How would you rate the hospital food?	1=100 2=67 3=33 4=0 5=M
40	Were you given enough privacy when being examined or treated?	1=100 2=50 3=0
42	Do you think the hospital staff did everything they could to help control your pain?	1=100 2=50 3=0
67	Overall, did you feel you were treated with respect and dignity while you were in the hospital?	1=100 2=50 3=0
Domain: Building closer relationships		
23	When you had important questions to ask a doctor, did you get answers that you could understand?	1=100 2=50 3=0 4=M
25	Did doctors talk in front of you as if you weren't there?	1=0 2=50 3=100
26	When you had important questions to ask a nurse, did you get answers that you could understand?	1=100 2=50 3=0 4=M
28	Did nurses talk in front of you as if you weren't there?	1=0 2=50 3=100

Domain: Safe, high quality, co-ordinated care		
33	Sometimes in a hospital, a member of staff will say one thing and another will say something quite different. Did this happen to you?	1=0 2=50 3=100
50	On the day you left hospital, was your discharge delayed for any reason?	1=See Main Reason 2=100 Main Reason: 1=0 2=0 3=0 4=M
51	What was the MAIN reason for the delay?	
60	Did a member of staff tell you about any danger signals you should watch for after you went home?	1=100 2=50 3=0 4=M
Domain: Better information, more choice		
34	Were you involved as much as you wanted to be in decisions about your care and treatment?	1=100 2=50 3=0
57	Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?	1=100 2=50 3=0 4=M 5=M
58	Did a member of staff tell you about medication side effects to watch for when you went home?	1=100 2=50 3=0 4=M