



Quality Survey

Report prepared for:

North East Lincolnshire CCG April 2016 by djs research







Alasdair Gleed Research Director

3 Pavilion Lane, Strines, Stockport, Cheshire, SK6 7GH

+44 (0)1663 767 857 djsresearch.co.uk











Lydia Golby – Nursing Lead for Quality for North East Lincolnshire CCG

Contents

Introduction2	
Headline Findings3	
Detailed Findings: What Does The NHS Need To Get Right?6	
Detailed Findings: What Makes A Health Service Good Quality? 14	
Appendices 22	

Introduction



Introduction

Below we provide a brief summary of the purpose of this report and the methodology used to prepare it.



This report was commissioned by North East Lincolnshire CCG. It has been prepared DJS bv Research, and independent market research company. The Nursing Lead for Quality has checked this report for accuracy and included the findings of the Focus Group on Quality held at the Accord Event.



Nationally, the NHS quality agenda sets out the three cornerstones for high quality care. These are Patient Experience, Effective Care and Patient Safety, together with how success is measured and what care should look and feel like for patients.



The CCG recognizes that people living in North East Lincolnshire may have some different experiences to the ones that have informed the national agenda which need to be taken into account in the local strategy.



Recently North East Lincolnshire CCG carried out engagement to inform their Quality Strategy by asking people to tell us what quality means to them.



Part of the engagement included an online and hard copy survey which explored how patients and the public define quality from a health service perspective. The questions included the following (the questionnaire is included in Appendix 2):



- From <u>your experience</u> of NHS services please list 3 things that you think are the most important for us to get right?
 - o Why have you chosen these three?
- In <u>your opinion</u> what are the top three things that makes a health service good quality?
 - Can you tell us a bit more about why you have chosen these three points?

In addition to this the Nursing Lead for Quality facilitated a Focus Group at an Accord Event to gain engagement and discussion around these questions.



People completing the survey were able to type in responses to these questions. The CCG received 73 completed surveys – a profile of respondents is provided in Appendix 1.

This report provides an overview of the survey responses and feedback obtained from the participant 'focus' group; initially we provide a summary of headline findings. We then provide a detailed analysis of the results.

Headline Findings





What Does The NHS Need To Get Right?

People responding to the survey were asked to type/write in three things that they think are the most important for the NHS to get right. These responses were grouped (coded) into themes to provide a quantification of views. Around 25 key themes emerged, with the top five as follows:

- ✓ Communication (34%)
- ✓ Access to care (27%)
- ✓ Quick and flexible appointment times (23%)
- ✓ Listening to patients (16%)
- ✓ Waiting times (15%)

Access is clearly a top-of mind issue, but many other themes relate to factors such as the manner of staff and listening to patients.

What Makes A Health Service Good Quality?

Respondents were also asked to type/write in three things that they think make a health service good quality. The list of themes was very similar to the previous question but the order and emphasis was slightly different, with even more emphasis on staff and an approach that is patient centred and ensures patients are treated with dignity and respect.

The top five themes/issues were as follows:

- ✓ Competence and manner of staff (41%)
- ✓ High quality / effective care (32%)
- ✓ Access to care (23%)
- ✓ Listening to patients (15%)
- ✓ = Patient centric / understanding patient needs (12%)
- ✓ = Compassion / dignity / respect (12%)

Focus Group Discussion on 'What Makes A Health Service Good Quality?'

Key themes emerged from a facilitated discussion group (12 attendees) with Accord Members. Participants shared their experiences and identified that;



communication; ease of access (in relation to booking appointments) and customer service are key to making a health service good quality.

What Does This Tell Us?

Further analysis identified that most of the 25 or so themes across these two questions could be grouped into four key areas. These areas and the key themes within them form the basis of what quality in the NHS means to service users in North East Lincolnshire. They are summarised overleaf.



What does quality mean to service users in North East Lincolnshire?





Communication

People clearly think that communication is a key area that providers of NHS services need to get right. Key themes include listening to patients, understanding patient needs, treating patients with compassion, dignity and respect, providing clear and honest information and keeping patients informed and upto-date.



Access

Access to care is also frequently mentioned as a key factor to get right in NHS services. Specific themes include *speed and flexibility of appointment times*, reasonable *waiting times*, *consistency* of access, *local* access, and *support with transport* where appropriate.



Effective Care

A raft of specific themes were mentioned in relation to effective care/high quality care. Effective care is often related to speed/accuracy of diagnosis and referral, but a patient centric approach is also important. Patients want to feel healthcare professionals respect their needs; they want to feel listened to and have information explained to them. Patients feel they should be the focus of the care and support given, and that support should not end with a diagnosis or discharge.



Staff

In the eyes of patients, the competence and manner (being courteous, respectful and helpful) of staff is seen as a vital ingredient in delivering a quality NHS service (it is also clear that many of the other themes and factors mentioned above are ultimately dependent on staff). Patients want to see staff who are trained in their job but also have good people skills, communicate well, listen and can understand and reassure vulnerable audiences. These are some concerns that staff shortages are impacting on the ability of staff to deliver on these issues.

Detailed Findings

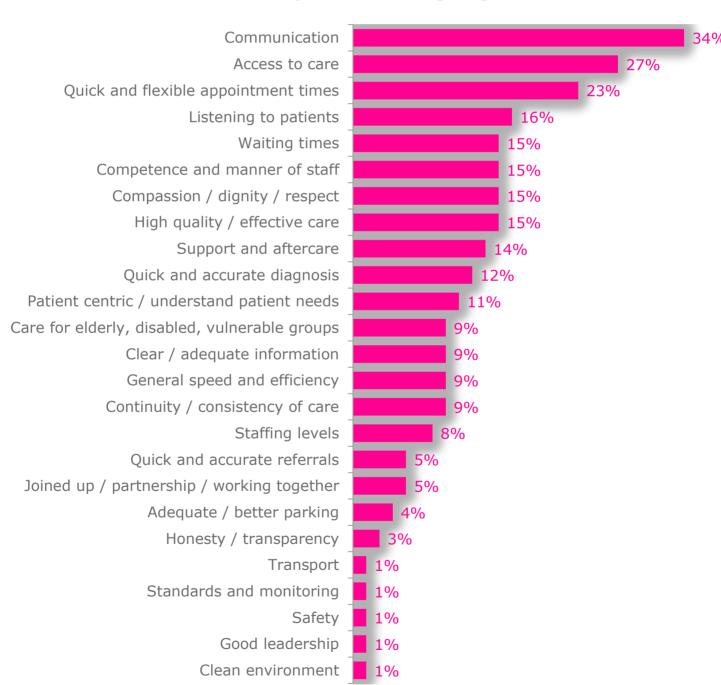


Detailed Findings

What Does The NHS Need To Get Right?

People responding to the survey were asked to type/write in three things that they think are the most important for the NHS to get right. These responses have been grouped (coded) into themes to provide a quantification of views (see below):

Q) From your experience of NHS services please list 3 things that you think are the most important for us to get right?





- **Communication:** communication is a key theme. As well as the 34% of people mentioning general communication, 16% mentioned 'listening to patients', and 15% made comments relating to treating patients with 'compassion, dignity and respect'.
- **Access:** three of the five main (most commonly mentioned) themes relate to access, namely 'access to care' (27%), 'quick and flexible appointment times' (23%) and 'waiting times' (15%).
- **Effective care:** many of the comments relate to effective care, for example 'high quality/effective care' (15%) and 'continuity/consistency of care' (9%).
- **Staff:** NHS staff cut across the above themes, and the quality of staff is also explicitly mentioned as a theme, in addition to staffing levels.

We explore these themes in more detail below.

Communication



People clearly think that communication is a key area that providers of NHS services need to get right. Over a third (34%) of people mentioned general communication, 16% mentioned listening to patients, and 15% made comments relating to treating patients with compassion, dignity and respect.

In addition, 11% highlighted the importance of *understanding patient needs*, 9% mentioned a need for *clear information*, and 3% mentioned *honesty and transparency*.

People responding to the survey were asked to provide a comment about why they chose the areas they stated as important. These detailed comments provide a more qualitative feel for the aspects of communication that are important to patients. These include:

- Patients want to be provided with clear information, and to be kept informed and up-to-date throughout treatment.
- Patients want to feel listened to, and want to feel that staff are treating them with dignity and respect.

Some example comments from the survey relating to these themes are provided overleaf.

I believe everyone should benefit from good communication, support and care - those three things for me should be high priority to the wellbeing of patients and the staff who are trained well to ensure this happens.

As a patient people are often worried and concerned about why they are visiting NHS establishments. Being given time and shown dignity and respect helps to ease people's fears and worries. Being kept up to date helps manage the time whilst people are waiting for test results etc. and makes people feel important and valued.

Important so that the patient is given clear, meaningful and precise information which they can understand

Communication

I want a NHS which keeps me fully informed, that deals with my problems efficiently and treats me with kindness and respect.

If you communicate well and the staff have a positive attitude as well as being honest about the situation at the time, the public will be much more understanding and cooperative resulting in a positive outcome. Nothing irritates me more than being "fobbed off"

Listen to patients, taking patient concerns seriously People always feel better able to cope when they are being recognised, kept informed of options and situations and when their fears and concerns are recognised and supported. It builds resilience, but also can have a direct physical impact for the better on people, and certainly makes it easier to interact with and help them.

There is nothing more frustrating than poor communication particularly if it involves switchboards. Patients are much more understanding of the staff's problems if they are spoken to with empathy e.g. clinic running late, mix up of appointments. Honesty is important as the public are not silly and can tell when things are being

Listen to carers, they know the cared for person best

Access



Access to care is also frequently mentioned as a key factor to get right in NHS services. Just under a third (27%) of people mention access to care, whilst 23% mentioned speed and flexibility of appointment times, and 15% mentioned waiting times.

Qualitative comments regarding the aspects of access that are important to patients highlight the key theme of waiting times, and flexibility of appointment times and locations, including:

- Patients would like to be able to book an appointment outside of their working day.
- Patients would like a notification in the waiting room should there be delays in appointment times.
- Patients would like access to GP appointments to be consistent across services to avoid perceived inequalities of service.
- Patients would like the ability to access their treatment locally.

I believe it is vital that, if we are to continue with an NHS - i.e. services that are provided free at point of access, there is a need to ensure that there is a consistency of the services. For example, at present booking and access to GP appointments is different across NEL and this could lead to inequality of service (or at least a perceived inequality).

Comments

1

Treatment locally can make situations more bearable, rather than having to travel out of the area.

As GP appointments are so difficult to come by, and often mean eating into the working day, which means I am required to make up the time taken to attend, it is galling to have to sit in the waiting room for an hour or so after my appointment.

If you are ill, you want to know what is wrong with you at the earliest opportunity. Waiting can only make matters worse and worry can aggravate situations.



Comments also highlight that who the patients can access care from is important to them, particularly from a consistency perspective:

- Patients want to be able to quickly secure an appointment with the healthcare professional that fits their needs.
- Some patients would like access to the same doctor each time they need to book an appointment; it is stated that consistency of care would increase their confidence in their doctor.
- If applicable, patients would like to be able to phone their doctor directly.



Additional mentions include:

- Patients want to be able to get to their appointment if they struggle to organise their own transport.
- Suggestions include an easily accessible hospital/GP transport service.



Effective Care

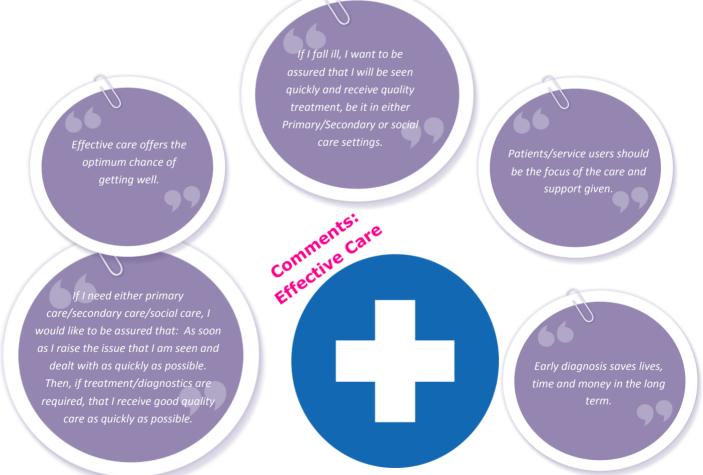


Just under a fifth of comments (15%) mentioned effective care/high quality care as an important factor. Comments also include support and aftercare (14%), quick and accurate diagnosis (12%), and patient centric care (11%).

Many use the phrase 'effective care' highlighting the need for good quality treatment. Qualitative comments highlight that how staff treat patients is a factor in whether care is viewed as effective¹:

- In practical terms, effective care is often related to speed/accuracy of diagnosis and referral.
- Patients want to feel healthcare professionals respect their needs. They want to feel listened to and have information explained to them.

• Patients feel they should be the focus of the care and support given; patient centric care.



¹ Please see following section for more information on people who have answered 'staff' as one of their 3 important factors.



Qualitative comments about patient experience from diagnosis to support and aftercare include:

- The negative effects of misdiagnosis or late diagnosis.
- Some mention the importance of support after having been told the diagnosis.
- Support and aftercare is mentioned as an important factor in patient's wellbeing and safety.

I was wrongly given a diagnosis that gave me a great deal of duress and unhappy stress for over 30 years! My personal experience was going into hospital for a bowel op, being discharged next day with no aftercare or advice. I ended up at the GP and then A+F

Comments: Effective Care

I believe everyone should benefit from good communication, support and care. Those three things for me should be high priority to the wellbeing of patients and the staff who are trained well to ensure this

> Early diagnosis saves, lives, time and money in the long term.

People always feel better able to cope when they are being recognised, kept informed of options and situations and when their fears and concerns are recognised and supported. It builds resilience, but also can have a direct physical impact for the better.

I was given a wrong diagnosis and was on medication for over 20 years that had very bad side effects
Plus the mental torment and the stigma attached robbed me of a family a good working life.

I had lots of tests. I was told the results, but had no transport to get home.

Although mentioned less frequently, other comments include care for vulnerable groups (9%), speed and efficiency (9%), consistency/continuity of care (9%), and quick and accurate referrals (5%).

Staff



Competence and manner of staff (15%) and staffing levels (8%) are both mentioned as important factors (it is also clear that many of the other themes and factors mentioned above are ultimately dependent on staff).

Qualitative comments regarding the aspects of staff that are important to patients include:

- Patients want good quality staff. They notice when staff seem stressed and can't perform at their best.
- Patients have experienced a shortage of staff resulting in poor care such as no or limited aftercare, staff not being readily available/accessible and so on.
- Some patients mention that admin staff were not helpful on several occasions.
- Patients want to see staff who are trained in their job but also have good people skills.
- Some also mention that staff seem to be leaving their role frequently.
- Patients state they have noticed that staff are being overworked.
- Patients would like support staff to be well trained.

Without good quality staff anything else is meaningless. This means attracting staff to the area, giving them good working conditions (physical and pay), allowing professional development to occur and valuing them.



Although clinically I could not fault my consultant, her support admin staff were less than helpful on 2 separate

Support staff should know what they are doing, have the right skills.

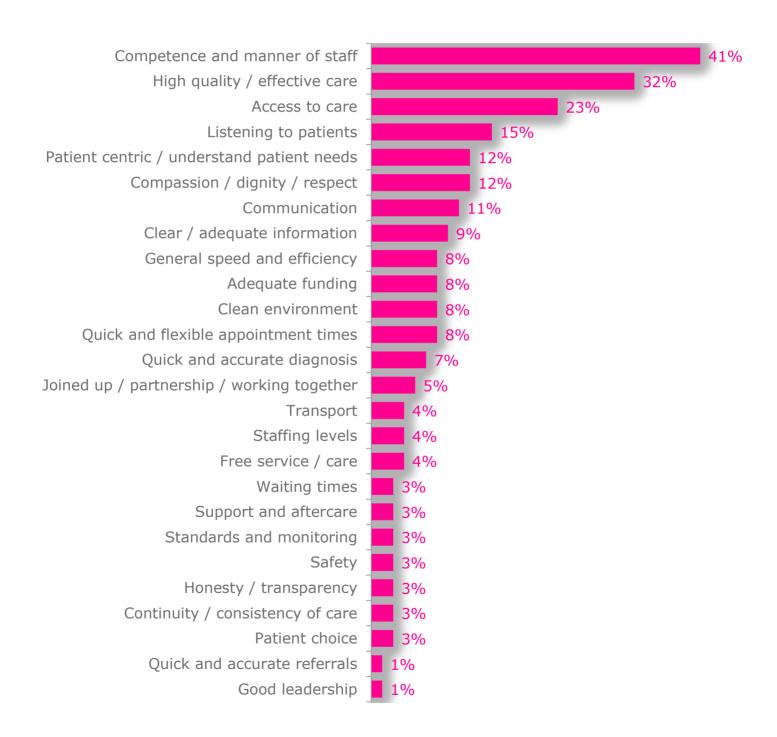
I am being treated by an excellent, caring consultant but he is heavily overloaded.

People need to be trained to do a good job but they also need good people skills. The hospital staff are always leaving and this destroys any relationship building between specialists and patient. The good staff tend to be replaced with mediocre staff.

What Makes A Health Service Good Quality?

People responding to the survey were also asked to type/write in three things that they think make a health service good quality. Again, responses have been grouped (coded) into themes to provide a quantification of views (see below):

Q) What are the top three things that make a health service good quality?



The themes emerging from this question are similar to the question about what the NHS needs to get right, but the emphasis is slightly different - When asked what makes a health service good quality, the competence and manner of staff (41%) and effective and quality care (32%) clearly emerge as very important. Although access issues remain important, they are now outweighed by issues relating to staff, effective care and communication. It is notable that three of the top six themes relate to how patients are listened to and treated respectfully in line with their needs:

- Listening to patients (15%).
- Patient centric / understand patient needs (12%).
- Compassion / dignity / respect (12%).

The individual themes can be grouped into the broader areas of interest as in the previous question:

- **Staff:** NHS staff appear vital in making a health service good quality: 41% mentioned competence and manner of staff.
- **Effective care:** over a third of comments mentioned 'high quality/effective care' (32%); 12% mentioned being patient centric and understanding patient needs, 8% general speed and efficiency of care, 7% quick and accurate diagnosis and 3% support and aftercare.
- Access: namely 'access to care' (23%), 'quick and flexible appointment times' (8%) and waiting times (3%).
- **Communication:** communication is again a key theme. 11% of mentions were about general communication, whilst 15% mentioned listening to patients, and 12% made comments relating to compassion, dignity and respect. 9% of comments also mentioned retrieving clear and adequate information.

We explore these themes in more detail below.

Staff



Just under a half of comments mentioned the competence and manner of staff (41%) – and again it could be argued that staff are an element of many of the other themes mentioned (e.g. communication).

A minority (4%) mentioned staffing levels.



Qualitative comments regarding the things staff do which make a good quality health service include the following themes:

- People often highlighted that the staff can 'make the difference' between poor and good quality care.
- People also feel that staff need to be well trained and have an understanding of vulnerable groups.

If I am treated by well trained staff who care about their patients in a clean, well run hospital and who let me know what is going on, then I can trust that the outcome will be as good as it can be.

Well motivated staff and happier patients will automatically make the experience better and the service a strongly positive

Staff who work for the NHS

need to have more caring

understanding towards

individual's with learning

disabilities, there needs to be

more training on best

interest's and MCA

Comments:

E

Quality staff are always a must and must be treated as such from all angles.

Well trained staff with the right

attitude can make all the

Any service is only as good as its staff, but they must have sufficient funds to be able to provide a quality service - they also need joined up information to enable this to happen.

The staff are the most important thing They make all the difference.



Qualitative comments also highlight that funding cuts, staff shortages, overworked staff and time limitations are factors which have the potential to negatively impact on quality:

- Some mention that staff are absolutely key to the quality of care, yet there doesn't seem to be the correct service funds available for staff to work at their best.
- People also mention that staffing levels are low which impacts on quality of care for reasons such as: a longer timeline before diagnosis and treatment, and less time for each patient in consultations.
- People highlight a risk that that under-appreciated staff can result in poor quality services.



Effective care



Over a third of people (32%) mention effective care as a top 3 factor that makes a health service good quality. In addition, 12% mention patient centric care, 8% mention speed and efficiency of care, 7% mention quick and accurate diagnosis, and 3% mention support and aftercare.

Qualitative comments regarding how effective care makes a good quality health service include:

- People mentioned that patients have individual needs.
- It is mentioned that if NHS decisions are based around effective care, quality of services would improve.
- People mentioned negative impacts of limited/no aftercare.
- People highlighted that support is a key part of effective care.
- Time pressures on NHS staff are highlighted as having a negative impact on the speed and efficiency of care.
- People mentioned that having to wait for diagnosis and access to information or treatment results in a lower quality level of care.

Waiting for access and diagnosis only adds to what can be a difficult situation for Patients and family.

Waiting for access, the patient can be frightened, needs good primary care but also after care to reassure and help with rehabilitation.

There is a fine line between being efficient and officious, professionals need to be compassionate, understanding and approachable, most of which they're not. They don't have time for the individual or the compassion, it's often dealt with like a cattle market, one in one out keep moving type of attitude.



I believe that effective care should underpin the way in which the NHS works - and that if we get this right, then there would be better staff morale, improved patient understanding and less reliance on services by users. The above three points will provide a clear pathway for continuous improvement.

The right type of care needs to be available to the right people. And the patient's wishes respected.

Access



Just under a quarter (23%) of comments mentioned access to care. In addition, 8% of comments mentioned quick and flexible appointment times and 3% mentioned waiting times.

Qualitative comments regarding how access makes (or detracts from) a good quality health service include:

- People mentioned that you can't always be seen by a doctor when needed.
- Some mentioned that they feel they are not seen by the service as a patient in need because of the time pressures and waiting lists.
- Some also mentioned that there are long waiting lists for important scans e.g. MRI scans, before a diagnosis can be reached.
- It is also mentioned that funding cuts to services increase accessibility concerns.

 Some also expressed concerns about access to GPs/hospitals for elderly people.

> Don't feel GP or Hospital is accessible when your old, have poor eyesight and mobility. Staff off handed and too busy to care.

When you can get access they can't get a doctor when you need one. When you're older no one wants to listen to what you want, everyone tells you what you want, no one cares about you as an individual, and you're just a number.

When you can get access they treat you like a number.

> People wait for months for MRI/scans x rays when needing diagnosis



NHS Services were the best anywhere however the reduction in funding is constantly in the press and affects people's views of how accessible services are and makes people question how

Illness does not have a calendar or a watch.

Communication



15% of comments mentioned that listening to patients is a top factor in a good quality health service. In addition, 12% mentioned compassion, dignity and respect, 11% mentioned 'communication' in general and 9% mentioned clear and adequate information.

Qualitative comments regarding how communication makes a good quality health service include:

- Treating patients with respect and compassion should come naturally, with some people suggesting that healthcare professionals need more training on the wards as well as academic training.
- People mentioned that good communication can lead to trust in the care they receive.



Appendices





Appendix 1: Respondent Profile

Gender

Q Male	C Female	Prefer not to answer
27%	72%	1%

Age	
35-44	5%
45-54	11%
55-64	23%
65 and over	20%
Prefer not to say	40%

Ethnicity



White	Mixed	Asian or British Asian	Black or Black British	Other	Prefer not to answer
96%	0%	0%	2%	1%	1%

Religion	
No religion	14%
Christian	73%
B uddhist	2%
Other	9%
Prefer not to answer	3%

Disability



Yes	No	Prefer not to answer
49%	46%	5%



Appendix 2: Questionnaire

Quality Survey

North East Lincolnshire CCG believes local people should have access to quality services. We want to hear what you think matters in health and care services, what is important to you and how we can make sure our quality measures reflect what is most important to people living in our area.

Please tell us your thoughts by completing this survey which should take between 5 and 10 minutes.

Thank You

In the first question we would like you to tell us from your personal experiences what quality means to you.

In the third question we are looking for what makes a health services good quality in more general terms.

	your experience of NHS services please list 3 things that you think are important for us to get right?	·e
1.		
2.		
3.		

2. Why have you chosen these three?

3. In <u>your opinion</u> what are the top three things that makes a health service good quality?
1.
2.
3.4. Can you tell us a bit more about why you have chosen these three points?
5. Any other comments please enter here:

The online survey can be found at:

https://www.surveymonkey.co.uk/r/QualityMattersNEL



This section is optional and you do not have to provide details about you as an individual. However, by doing so, you are helping the CCG to determine if they have reached a true representation of the local population and if they affect the responses that are given. No personal information which can identify you, such as your name or address, will be asked for.

1. What is y	What is your Gender? Please circle one option or state if "Other".					
Male		Female	nale Prefer not to disclose			
Other:						
or actions) to identify with,	o change from or do you inte	you gone through a the sex you were d nd to? (This could i mones or having ar	escribed a nclude cha	s at birth to anging your	the gender your name, wear	you
Yes		No	Pr	efer not to	disclose	
3. Sexual O	rientation. <i>Ple</i>	ease circle one op	tion or sta	te if "Othe	er".	
Heterosexua	al/Straight	Gay/Lesbia	n Bi	sexual	Prefer not to	say
Other:						
4. Religion	or Belief. <i>Plea</i>	se circle one opti	on or state	if "Other		
Christian	Muslim	Buddhist	Jewish		Sikh	Hindu
None	Prefer not to	say				
Other:						

5. Do you consider yourself to have a disability? *Please circle one option or state if "Other"*.

No

Sensory impairment such as being blind or having a visual impairment

Sensory impairment such as being deaf or having a hearing impairment

Learning disability or difficulty (such as Down's syndrome or dyslexia) or cognitive impairment (such as autistic spectrum disorder)

Mental health condition such as depression, dementia or schizophrenia

Long-standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease or epilepsy

Physical impairment such as difficulty moving your arms or mobility issues

Wheelchair user

Prefer not to say

Other:

6. Please describe your race/ethnicity. Please circle one option or state if "Other".

White – British White – Irish White - Any other White background Mixed - White and Black Caribbean Mixed - White and Black African Mixed - White and Asian Mixed - Asian or Asian British-Indian Mixed - Any other Mixed background Asian or Asian British – Pakistani Asian or Asian British – Bangladeshi Asian or Asian British - Any other Asian background Black or Black British – Caribbean Black or Black British - African Black or Black British - Any other Black background Chinese Prefer not to say Other

7. Do you have any examples of where you feel that your access to and/or communication with local health services has been AFFECTED by your equality characteristic (e.g. your race, disability, sexual orientation, etc.)?
8. Do you have any examples of where you feel that your equality characteristic (e.g. your race, disability, sexual orientation, etc.) has been CONSIDERED AND/OR IMPROVED your access to and/or communication with local health services?

Thank you for taking the time to complete our survey.

Contact us...

Alasdair Gleed Research Director

3 Pavilion Lane, Strines, Stockport, Cheshire, SK6 7GH

+44 (0)1663 767 857 djsresearch.co.uk













Lydia Golby

Nursing Lead for Quality

NHS North East Lincolnshire Clinical Commissioning Group

Athena building, 5 Saxon Court, Gilbey Road, **Grimsby NE Lincolnshire DN31 2UJ.**

Tel: 0300 3000 594

Email: Lydia.Golby@nhs.net