

# Patient Experience

## Planned Care

What are people telling us?

February 2015





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## Introduction

NHS Wakefield Clinical Commissioning Group's (CCG) vision clearly expresses the aim to improve patients' experience of healthcare within Wakefield District.

The CCG has produced a Patient Experience Framework to ensure that patient experience is firmly embedded in all commissioning activities and decisions <http://www.wakefieldccg.nhs.uk/wp-content/uploads/2013/11/NHS-Wakefield-CCG-Patient-Experience-Framework.pdf> – see Appendix 1. As part of the wider work of the CSU in supporting the CCG to deliver on this vision, quarterly reports triangulating the various sources of patient feedback are produced.

Using patient experience information supports the CCG in making decisions about local health services. The CCG's five year plan is informed by listening to local people's experience of services to help decide priorities for the next five years and to plan services that enable people to stay in control of their own health and well-being. This report links to one of the five main focuses in the CCG's five year strategic plan 2014-19:

- ***“Better organised planned care – including outpatient appointments and surgery”***

Furthermore it supports two of the eight commissioning intentions set out in the strategic plan:

- ***“Citizen participation and engagement”*** and
- ***“a step change in the productivity of elective care”***

It is recognised that information relevant to planned care is constantly being generated. However, for the purposes of this report, engagement information carried out until the end of December 2014 is included. To provide the most up to date picture in respect of the CCG's real time data, information gathered by the Patient Advice and Liaison Service, Patient Opinion, NHS Choices and Complaints includes feedback generated primarily between October and December 2014. Other data collected is also taken from the same time periods. Earlier data has been used where available and relevant.

The CCG recognises that no single source of information will provide the full picture of what the experience of services is locally. This is why several sources of information were used to establish the main themes.



## Planned Care

The CCG's vision for planned care is to commission a choice of accessible, high quality, safe, patient focused and cost effective services for its patients, delivering the right care, at the right time, in the right place overseen by a clinical lead. In order to deliver the step change in productivity of elective care the CCG has planned interventions in five areas:

- **“Improving outcomes, reducing variation and demand”**
- **“Reducing unwarranted variation in diagnostic services to improve quality and increase value for money”**
- **“Maximising technology”**
- **“Contract and service review – CCG 3 year procurement plan”**
- **“Maximising contract levers and incentives across the whole health care system”**

For the purpose of gathering patient experience data for this report the following definition of planned care was used:

**Planned or elective care is pre-arranged, non-emergency care that includes scheduled operations. It is provided by medical specialists in a hospital or other secondary care setting. Patients are usually referred from a primary care professional such as a GP.**

**In England, under the NHS Constitution, patients 'have the right to access services within maximum waiting times, or for the NHS to take all reasonable steps to offer a range of alternative providers if this is not possible'. Referral to treatment (RTT) data is used to monitor NHS waiting times performance against the standards set out in the NHS Operating Framework.**

**One of NHS Wakefield CCG's commissioning intentions is 'A step change in productivity of elective care' with a vision to commission a choice of accessible, high quality, safe, patient focused and cost effective services for our patients, delivering the right care, at the right time, in the right place**



## Actions and next steps

The report was discussed at the Quality Intelligence Group on 17 March 2015 and will be presented to our Public Involvement and Patient Experience Committee (PIPEC) at their next meeting in March 2015. The recommendation from the Quality Intelligence Group was for the report to be presented to the Clinical Cabinet and be widely shared to ensure that patient experience and insight is influencing future decisions related to planned care.

The report will also be made publicly available on the CCG's website.

## Methodology

To answer the question 'what are people telling us?' a qualitative analysis of a range of sources of patient feedback has been undertaken for NHS Wakefield Clinical Commissioning Group.

Due to the varied nature of the information contained within this feedback, and as a result of the information already being subject to summary and collation, a content analysis approach was selected.

Content analysis allows systematic scrutiny of textual information giving insight into the frequency and variety of messages, themes and concepts within it. Content analysis allows for a rapid review of material, can identify trends in the information, and allows conclusions to be drawn about the presence or absence of issues and characteristics within it. Inferences drawn from the analysis are limited and cannot ascribe causality, as content analysis can only describe the 'what' but not the 'why'.

The accepted method of content analysis has been adapted for the more pragmatic approach required here, and the following steps undertaken:

- Determine the material to be included in the analysis – some sources of information included numerical rather than textual data and so were excluded
- Select units of analysis – the recording unit used here was the individual sentences or phrase contained within a document.
- Use a manifest analysis of each sentence, where the meaning of the sentence is taken at face value, rather than a latent analysis where meanings are inferred



- Develop coding categories – deductive coding categories have been used from the predetermined categories of the patient experience framework, though some modifications may be required to make them appropriate. The categories contained within the framework were used to measure the frequency of each concept occurring in the text with a further level of analysis ascribing ‘positive’ or ‘negative’ to the recording unit
- Coding the material – a small pre-test of the coding framework was undertaken, then the all the patient feedback sources were coded manually
- Simple descriptive statistics were then used to highlight main points arising from the analysis, supported by direct patient quotes.

## Main Themes

A total of 1,489 patient comments, from the full range of feedback sources, relating to patient experiences in planned care across the CCG were included in the qualitative analysis, and the majority of these were negative (71%). Table 1 summarises the frequency of reporting of the patient experience themes across all sources of patient feedback for Wakefield CCG.

### Positive feedback

Patients most frequently report **positive experiences** in the following areas:

- Access to care: 9% of all comments
- Respect for patient centred values, preferences, and expressed needs: 8% of all comments
- Information, communication, and education: 6% of all comments

Patients commented that they felt that staff treated them with dignity and respect and that they also felt listened too. Patients were able to ask questions and were given useful information. Patients also commented that there was timely access to appointments and that being able to access a service locally was very convenient. Some examples of patient comments include:

*“The doctors and nurses were very considerate explaining everything to you as you went along.”*

*“I was treated as an elderly person not just a number with kindness and dignity and respect by all staff.”*



*“Ease of booking first and subsequent appointments... ability to choose from a range of locations to have appointment.”*

### Negative feedback

Patients most frequently report **negative experiences** in the following areas:

- Access to care: 23% of all comments
- Information, communication, and education: 19% of all comments
- Physical Comfort: 14% of all comments

Patients commented that there was a lack of information given with appointment letters, and not being informed about waiting times both for an appointment and delays in outpatient settings. There were difficulties getting through to some services when booking appointments, and long waits to see clinicians were also highlighted by patients. Comments also included problems with waiting areas and cleanliness and a lack of parking. Some examples of patient comments include:

*“How on earth can a department be running nearly 1 ½ hours late at 11 in the morning? ...I could not reclaim my parking”*

*“(Letter) doesn’t say what for. Been to wrong department this morning. Don’t know which doc I’m seeing.”*

*“Been to three toilets today and there was no soap in any of them.”*

Table 1. Summary of frequency (rounded % of total 1,489 comments) of reporting of NHS Patient Experience Framework themes in all sources

Overarching patient experience theme	Positive	Negative
Respect for patient centred values, preferences, and expressed needs	8%	4%
Coordination and integration of care	<1%	7%
Information, communication, and education	6%	19%
Physical comfort	2%	14%
Emotional support and alleviation of fear and anxiety	4%	4%
Welcoming the involvement of family and friends, on whom patients and service users rely	0%	%
Transition and continuity	<1%	0%
Access to care	9%	23%
<b>Overall</b>	<b>30%</b>	<b>71%</b>



## Sources of information and what they tell us

### PALS, COMPLAINTS, PATIENT OPINION AND NHS CHOICES

A total of 233 patient comments were included in the analysis of patient feedback on experiences of planned care from PALS, Complaints and Patient Opinion. These were fairly equally split between positive and negative comments. Table 2 shows the frequency of reporting of each of the overarching themes within the NHS Patient Experience Framework for PALS, Complaints and Patient Opinion.

#### Positive feedback

Patients most frequently reported **positive experiences** about planned care through PALS, Complaints and Patient Opinion in the following areas:

- Respect for patient centred values, preferences, and expressed needs: 23% of all comments
- Information, communication, and education: 15% of all comments
- Emotional support and alleviation of fear and anxiety: 12% of all comments

Patients commented that they felt that staff treated them with empathy and respect and made to feel comfortable. Clinical staff also ensured patients had fully understood any procedures or treatment options and patients. Some examples of patient comments include:

*“The nurse who dealt with me was kind, efficient and had lots of empathy.”*

*“Nurses and doctors will answer any questions you may have.”*

*“When I arrive, I walk like a cripple and when I leave I feel like I’m on a cloud.”*

#### Negative feedback

Patients most frequently reported **negative experiences** about planned care through PALS, Complaints and Patient Opinion in the following areas:

- Information, communication and education: 15% of all comments
- Access to care: 14% of all comments
- Emotional support and alleviation of fear and anxiety: 7% of all comments

Patients commented that staff were unhelpful, lacking reassurance or that clinical staff were dismissive of their concerns. Difficulties patients experienced in getting an appointment and not hearing anything from the hospital regarding appointments



were also frequently commented upon. Some examples of patient comments include:

*“I would suggest that the Consultant has additional training in terms of his communication skills with young people, I do not feel that arrogance has any place within the modern NHS... the delivery of his patronising words... needs tailoring.”*

*“My referral was cancelled and I am still waiting to be seen ... with no contact from the hospital unless I chase.”*

*“Before the operation I was given no reassurance and with this being my first operation I was very nervous”*

Table 2. Summary of frequency (rounded % of total 181 comments) of reporting of NHS Patient Experience Framework themes from PALS, Complaints and Patient Opinion

Overarching patient experience theme	Positive	Negative
Respect for patient centred values, preferences, and expressed needs	23%	5%
Coordination and integration of care	0%	3%
Information, communication, and education	15%	15%
Physical comfort	3%	2%
Emotional support and alleviation of fear and anxiety	12%	7%
Welcoming the involvement of family and friends, on whom patients and service users rely	0%	0%
Transition and continuity	0%	0%
Access to care	3%	14%
Overall	56%	46%

## ENGAGEMENT INITIATIVES

A total of 662 patient comments, from four surveys: anticoagulation, MSK, Gastroenterology and Ophthalmology services, which related to patient experiences in planned care were included in the analysis. The majority of the comments regarding experiences of care as a whole were negative (61%). Table 3 shows the frequency of reporting of each of the overarching themes within the NHS Patient Experience Framework from engagement initiatives.

### Positive feedback

Patients most frequently reported **positive experiences** about planned care through engagement initiatives in the following areas:



- Access to care: 17% of all comments
- Information, communication, and education: 8% of all comments
- Respect for patient centred values, preferences, and expressed needs: 8% of all comments

Patients commented that they were provided with useful information and in particular the appointment text reminder service. Having access to quick and convenient appointment times was also noted by some patients. Friendly and professional staff was also commented on. Some examples of patient comments include:

*“Appointments easy and you can rebook them easily.”*

*“Very professional and friendly nursing staff. I am very pleased with the service.”*

*“...easy to find, clear information.”*

### Negative feedback

Patients most frequently reported **negative experiences** about planned care through engagement initiatives in the following areas:

- Access to care: 24% of all comments
- Information, communication, and education: 16% of all comments
- Coordination and Integration of care: 10% of all comments

Patients commented on problems they experienced getting appointments in a timely manner and to fit in with working full time. Problems experienced with nobody answering the phone to arrange appointments. Patients also commented on a lack of communication between hospitals and GP practices. Some examples of patient comments include:

*“I have been unable to get an appointment ...so I can get to work on time.”*

*“Lack of communication between hospitals.”*

*“What is the point in having a contact phone number when no-one answers it? What is the alternative?”*

Table 3. Summary of frequency (rounded % of total 662 comments) of reporting of NHS Patient Experience Framework themes from engagement initiatives.

Overarching patient experience theme	Positive	Negative
Respect for patient centred values, preferences, and expressed needs	8%	4%



Coordination and integration of care	1%	10%
Information, communication, and education	8%	16%
Physical comfort	2%	6%
Emotional support and alleviation of fear and anxiety	4%	2%
Welcoming the involvement of family and friends, on whom patients and service users rely	0%	0%
Transition and continuity	1%	0%
Access to care	17%	24%
<b>Overall</b>	<b>39%</b>	<b>61%</b>

## PATIENT SAFETY WALKABOUT

No information was received on patient safety walkabouts regarding planned care during the period under consideration.

## QUALITY INTELLIGENCE GROUP

A total of 19 comments from the Quality Intelligence Group (QIG) were received. However, these comments are feedback from staff, or third party summaries of patient feedback, rather than direct patient comments. For this reason they were not included in the qualitative analysis underpinning this report and do not feature in its conclusions. They are summarized here for completeness. 17 of the 19 comments regarding experiences of care were negative (89%). Table 4 shows the frequency of reporting of each of the overarching themes within the NHS Patient Experience Framework from the Quality Intelligence Group.

### Positive feedback

**2 positive experiences** about planned care were reported through the QIG. Both related to coordination and integration of care, 10% of all comments.

Patients were reported to have been treated with skill, speed and care and being highly satisfied with diagnosis and treatment.

### Negative feedback

Most frequently reported **negative experiences** about planned care through the QIG were in the following areas:

- Access to care: 68% of all comments
- Information communication and education: 21% of all comments



Patients were reported to have had negative experiences with getting appointments, waiting times and delayed referrals and cancellations at short notice.

No direct patient comments are available to include.

Table 4. Summary of frequency (rounded % of total 19 comments) of reporting of NHS Patient Experience Framework themes from the QIG.

Overarching patient experience theme	Positive	Negative
Respect for patient centred values, preferences, and expressed needs	0%	5%
Coordination and integration of care	11%	11%
Information, communication, and education	0%	5%
Physical comfort	0%	0%
Emotional support and alleviation of fear and anxiety	0%	0%
Welcoming the involvement of family and friends, on whom patients and service users rely	0%	0%
Transition and continuity	0%	0%
Access to care	0%	68%
<b>Overall</b>	<b>11%</b>	<b>89%</b>

## HEALTHWATCH WAKEFIELD

A total of 594 patient comments, from the Healthwatch outpatient survey were included in the analysis of patient feedback on experiences of planned care. A large majority of comments regarding experiences of care as a whole were negative (90%). Table 5 shows the frequency of reporting of each of the overarching themes within the NHS Patient Experience Framework for Healthwatch.

### Positive feedback

Patients most frequently reported **positive experiences** about planned care through Healthwatch in the following areas:

- Respect for patient centred values, preferences, and expressed needs: 4% of all comments



- Access to care: 2% of all comments
- Information, communication and education: 2% of all comments

Patients commented that staff were friendly, helpful and met their expressed needs. The volunteer guides were commented on as being very helpful and informative particularly in directing patients around the new hospital. Patients also commented that they received appointments quickly and appreciated having local services and a choice. Some examples of patient comments include:

*“...staff friendly, helpful and caring...”*

*“...the volunteer guides ...invaluable as take stress of finding places off the patient”*

*“they moved appts to DDH when they noticed where I lived”*

### Negative feedback

Patients most frequently reported **negative experiences** about planned care through the Healthwatch in the following areas:

- Physical Comfort (29% of all comments)
- Access to care (25% of all comments)
- Information, communication and education (24% of all comments)

Patients commented that car parking was difficult and expensive and waiting areas were crowded and dated. Information sent with appointment letters regarding the new hospital layout and where to go were inadequate. Patients had long waits for appointments, waiting in clinic and little choice of hospitals nearer to home. Patients also weren't informed about delays in outpatient areas. Some examples of patient comments include:

*“Did not have Gate no. on letter – or a map for which entrance.”*

*“Used choose and book then when got to clinic didn't know about us. Another appointment was cancelled but we didn't get letter”*

*“Parking not good. Need info on parking to be sent out with appointment letter”*

Table 5. Summary of frequency (rounded % of total 594 comments) of reporting of NHS Patient Experience Framework themes from Healthwatch

Overarching patient experience theme	Positive	Negative
Respect for patient centred values, preferences, and expressed needs	4%	3%
Coordination and integration of care	0%	5%



Information, communication, and education	2%	24%
Physical comfort	1%	29%
Emotional support and alleviation of fear and anxiety	1%	5%
Welcoming the involvement of family and friends, on whom patients and service users rely	0%	0%
Transition and continuity	0%	0%
Access to care	10%	25%
<b>Overall</b>	10%	90%

In addition to the analysis above; some data in the Healthwatch survey could not be analysed using content analysis. Information from this data is summarised below:

**Question: Did you use ‘Choose and Book’ to make your appointment?**

Only 1 respondent indicated they used ‘Choose and Book’ online. 6 people commented that ‘Choose and Book’ didn’t work or that there were no appointments available on ‘Choose and Book’.

**Question: Is your appointment a review/follow-up appointment which has been arranged for you?**

33 respondents answered yes. 23 respondents indicated it was their first appointment.

**Question: Were you given a choice of where to go?**

39 respondents implied no. 17 stated yes or that they asked for somewhere or the appointment was rearranged on request. 122 implied they were happy with what they were given regardless of whether they had a choice.

**Question: Why did you choose to come to this hospital?**

- 9 were inpatients at that hospital;
- 201 near home/convenient
- 18 good service/prefer
- 18 shorter waiting time
- 3 parking better
- 4 recommended to them

**Question: If your appointment is at Pontefract, Pinderfields, Huddersfield or Calderdale Hospital, did you book in using the ‘in touch’ screen?**

11 respondents indicated that they used the touch screen but in all cases required help from a relative or staff. 36 respondents stated that the touch screen didn’t work or they encountered a problem with it. 21 said it couldn’t be used for their clinic or were advised not to use by staff



**Question: Was the 'in touch' booking process easy to follow?**

32 people responded no. Nobody answered yes.

**Question: Was the receptionist polite and welcoming when you arrived at clinic?**

27 respondents stated yes, 10 stated no

**Question: What do you think about the waiting area?**

373 respondents said the waiting area was good. 189 respondents said it was ok/alright. 151 said it was poor. Negative comments included the following:

- 6 Lack of magazines
- 15 No toys/activities for older children
- 14 No TV or not on
- 54 Too small, crowded, not enough seats
- 10 Need water and/or drinks machine
- 7 Not being able to hear when called by receptionist. Need display screen/PA.
- 2 No wifi
- 10 Quality of seats
- 3 Layout of seats
- 7 Not enough room for wheelchairs/pushchairs
- 1 No patient leaflets
- 19 Ambience/décor
- 3 Signage (blue on blue background)

## Summary and conclusion

This section gives a summary of each of the sources of patient feedback included in the report. It concludes with a summary overview drawn from qualitative analysis of a total of 1,489 patient comments.

233 patient comments from PALS, Complaints and Patient Opinion were fairly equally split between positive and negative comments. Both: information, communication, and education and emotional support and alleviation of fear and anxiety featured in the top three most frequently cited themes in both the positive and negative categories.

For engagement initiatives there was a total of 662 patient comments, from four surveys: Anticoagulation, MSK, Gastroenterology and Ophthalmology Services. The majority of the comments regarding experiences of care as a whole were negative (61%). access to care and information, communication, and education were the first



and second most frequently cited themes in both the positive and negative categories.

19 comments from the Quality Intelligence Group (QIG) were received. However, these comments were feedback from staff, or third party summaries of patient feedback, rather than direct patient comments. For this reason they were not included in the qualitative analysis underpinning this report and do not feature in its overall conclusions given below. They are summarized on page 10 above for completeness. A large majority of comments were negative (89%). The most frequently cited negative theme was access to care and it should be noted that this is very much in line with the results of the analysis of direct patient comments.

594 patient comments were analysed from the Healthwatch outpatient survey. A large majority of comments regarding experiences of care as a whole were negative (90%). Information, communication and education featured in the top three most frequently cited themes in both the positive and negative categories. Physical comfort and access to care were the first and second most frequently cited negative themes.

A total of 1,489 patient comments, from the full range of feedback sources, relating to patient experiences in planned care across the CCG were included in the qualitative analysis. 71% of these were negative. It was notable that the single most frequently cited theme was the same in both the positive and negative categories. The single most frequently cited theme was access to care – 9% of all positive comments and 23% of all negative comments.



## Appendix 1

# Patient Experience Framework





## Appendix 2



### NHS Patient Experience Framework

In October 2011 the **NHS National Quality Board (NQB)** agreed on a working definition of patient experience to guide the measurement of patient experience across the NHS. This framework outlines those elements which are critical to the patients' experience of NHS Services.

- **Respect for patient-centred values, preferences, and expressed needs**, including: cultural issues; the dignity, privacy and independence of patients and service users; an awareness of quality-of-life issues; and shared decision making;
- **Coordination and integration of care** across the health and social care system;
- **Information, communication, and education** on clinical status, progress, prognosis, and processes of care in order to facilitate autonomy, self-care and health promotion;
- **Physical comfort** including pain management, help with activities of daily living, and clean and comfortable surroundings;
- **Emotional support** and alleviation of fear and anxiety about such issues as clinical status, prognosis, and the impact of illness on patients, their families and their finances;
- **Welcoming the involvement of family and friends**, on whom patients and service users rely, in decision-making and demonstrating awareness and accommodation of their needs as care-givers;
- **Transition and continuity** as regards information that will help patients care for themselves away from a clinical setting, and coordination, planning, and support to ease transitions;
- **Access to care** with attention for example, to time spent waiting for admission or time between admission and placement in a room in an in-patient setting, and waiting time for an appointment or visit in the out-patient, primary care or social care setting.

This framework is based on a modified version of the Picker Institute Principles of Patient-Centred Care, an evidence based definition of a good patient experience. When using this framework the NHS is required under the Equality Act 2010 to take account of its Public Sector Equality Duty including eliminating discrimination, harassment and victimisation, promoting equality and fostering good relations between people.





## Version control

Version	Details of Changes	Author/Editor	Date
v01	Initial draft prepared	Rob Mooney	02/03/2015

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