

## Board of Directors (in Public)

### Item 3.2

**Subject:** Care Quality Commission National Inpatient Survey Results 2017  
**Date of meeting:** 3rd July 2018  
**Prepared by:** Joanne Shaw Lead Nurse PFCC and Safeguarding and Sue Pemberton Director of Nursing and Quality  
**Presented by:** Sue Pemberton Director of Nursing and Quality  
**Purpose of Paper** To Note

BAF Ref	Impact on BAF
1.1	Assurance on Trust's National Patient Survey Results 2017

#### 1. Executive Summary

Liverpool Heart and Chest Hospital has been rated top in the country for overall patient care for 9 out of the last 12 years. The National In-patient survey 2017 results have demonstrated that the Trust has improved its rating for overall care from 9.1 to 9.2. This has resulted in the Trust being rated top in the country for overall care. The results highlighted that there are only two areas of statistically significant change positively, from the previous year's results. The one area highlighted in the 2016 results which had been highlighted for improvement pertaining to emotional support for patients has seen an increase in the 2017 results.

Together with being rated top in the country for overall care the Trust has been rated top in two sections of the report pertaining to care and treatment and the hospital and ward together with top for four specific questions in the report.

The Quality Committee will review the in-patient survey results (2017) and discuss the planned actions to improve, at its meeting in July 2018. The purpose of this paper is to provide the Board of Directors with an overview of the results of the 2017 National In-Patient survey and to outline work on going to continuously improve.

The in-patient survey results can be accessed via the following link <https://www.cqc.org.uk/provider/RBQ/survey/3#undefined>

#### 2. Background

The fourteenth survey of adult inpatients involved 148 acute and specialist NHS trusts Responses were received from 72,778 people, a response rate of 41%. Patients were eligible for the survey if they were aged 16 years or older, had spent at least one night in hospital and were not admitted to maternity or psychiatric units. Trusts sampled patients discharged during July 2017.

LHCH counted back from the last day of July 2017, including every consecutive discharge, until they had selected 1250 patients. Fieldwork took place between September 2017 and January 2017. LHCH received responses from 794 patients, a rate of 65%.

The Care Quality Commission will use the results from this survey in the regulation, monitoring and inspection of NHS acute trusts in England. They will use data from the survey in our system of CQC Insight, which provides inspectors with an assessment of risk in areas of care within an NHS trust that need to be followed up. The survey data will also be included in the data packs that are produced for inspections.

### 3. Areas of high performance

The Trust has been rated top nationally in the following individual questions:

Q24 Did you have confidence and trust in the doctors treating you?

Q32 In your opinion, did the members of staff caring for you work well together?

Q39 Were you given enough privacy when discussing your condition or treatment?

Q43 If you needed attention, were you able to get a member of staff to help you within a reasonable time?

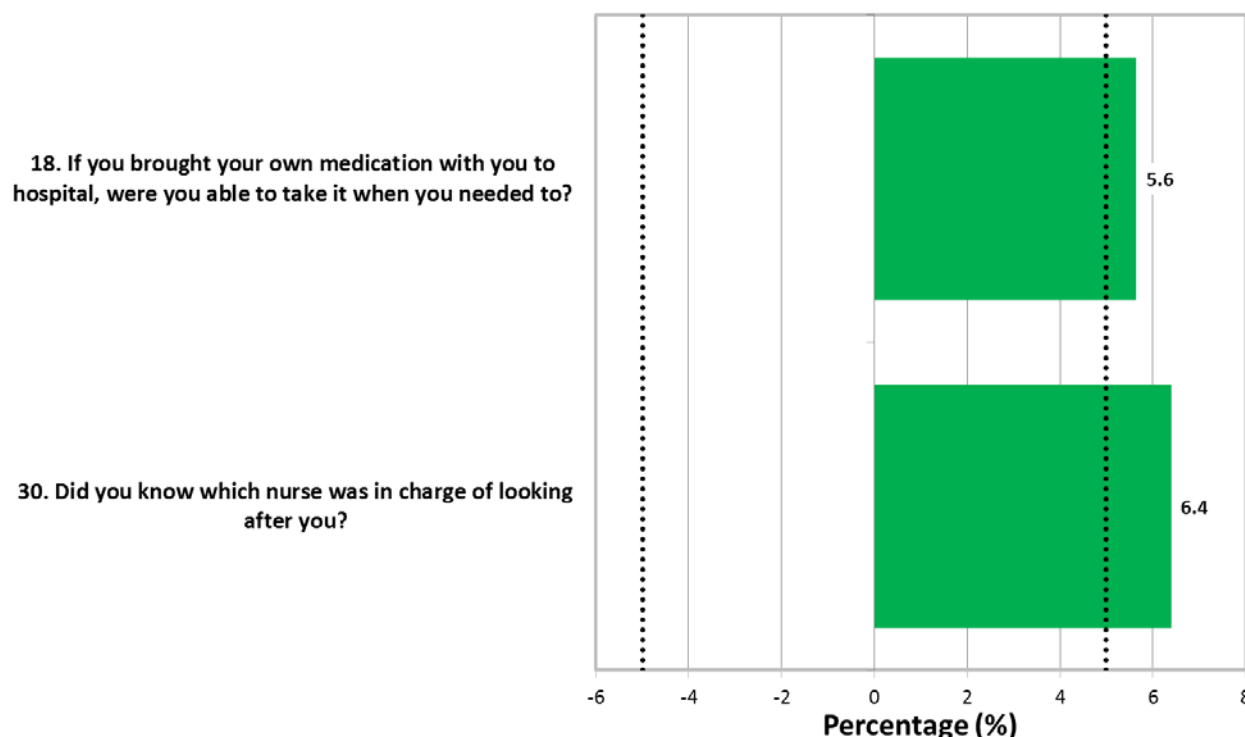
Q68 Overall experience

The Trust has also been rated top in two sections of the survey

- Care and treatment
- The hospital and ward

The chart below highlights the two areas where the trust saw a significant improvement in performance over last year.

### Inpatient Survey 2017: Significant change from 2016 - 2017



### Actions taken and future work

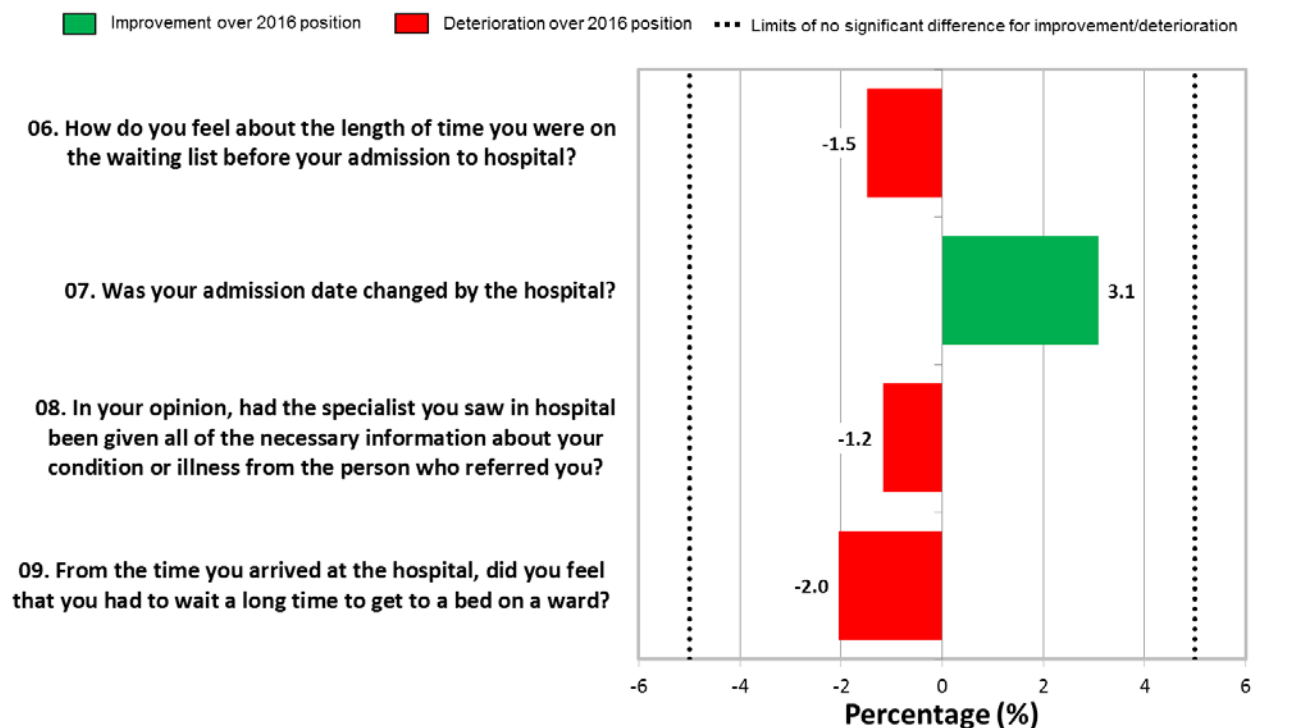
- The Trust introduced 'this is me boards' over the last twelve months

- Ward Monitors with Ward Managers name and contact details on.
- Ward Managers contact with patients monitored as part of EECS
- All ward managers/senior nurses are encouraged to review every patient every day to ensure the patients are aware of the nurse in charge
- Bedside handovers have been introduced in some areas with the remaining areas looking at introducing a minimum of one bedside handover
- Consultant led ward rounds in place across surgery and medicine to introduce from the autumn this year.
- Focus on the HCA role to ensure that their priority is patient comfort and care over the past year and comfort checks hourly for all patients
- Reviews of nursing stations in bays in the wards

## 4. Results

### 4.1 Admission

#### Inpatient Survey 2017: Admission



#### **Actions taken and future work**

Several changes to patient flow have been undertaken in the last year including:

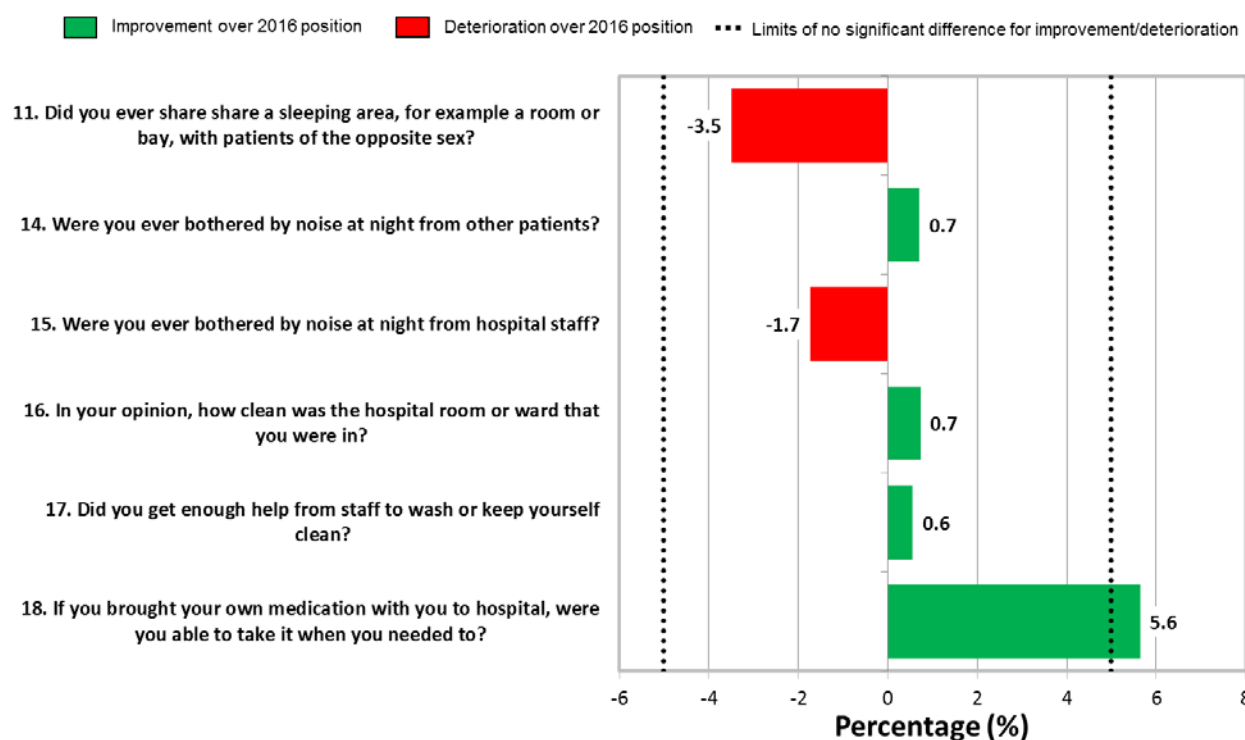
- New same day admission unit
- Developed a new pathway for admission of patients with dementia and/or learning disabilities where capacity screening can be done prior to admission, in their own homes.
- Development of a new welcome booklet for patients with learning disabilities
- Patient flow and CUR is a key focus of improvement for the next twelve months

- Electronic Urgent Pathway installed
- Standard operating procedure for urgent patients developed
- As part of same day admission – all elective patients will be seen in pre op CNP clinics

## 4.2. Hospital and ward

The Trust was rated top in the country for this section.

### Inpatient Survey 2017: The Hospital and Ward



### **Actions taken and future work**

- New eye masks for Critical care patients and will be introduced for the patients on wards
- New bathrooms and bedrooms on Maple Suite
- Enhanced care protocol developed
- Activity packs on all ward areas updated
- Noise sensors in place in critical care
- New bedrooms on Maple suite
- New toilet seats across all areas

### 4.3 Food

#### Inpatient Survey 2017: Food

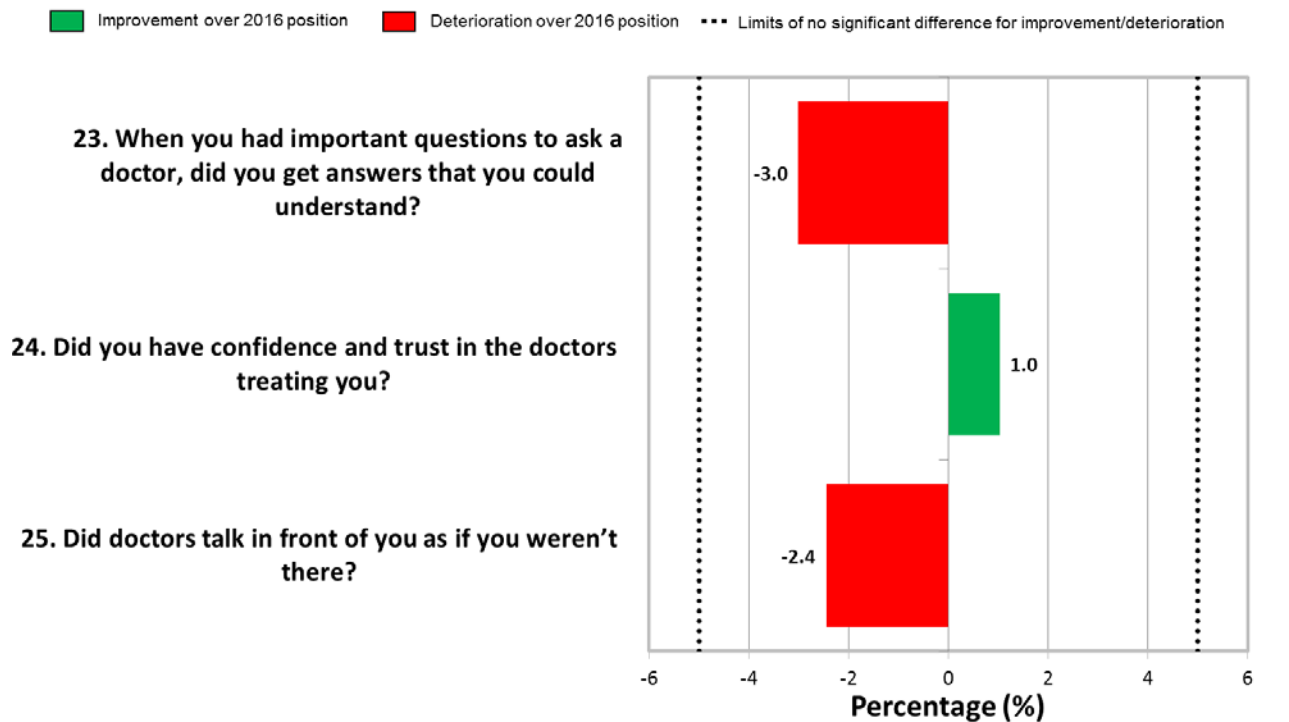


#### **Actions taken and future work**

- Patient and family centred approach to mealtimes
- Updated 'nutritional status' at a glance board in the kitchen areas to include dementia patients
- Pictorial menus introduced for pureed diets and patients living with a cognitive impairment such as dementia
- New sandwiches and new flavours in wide choice of breads including gluten free
- Increased number of mealtime observations to include breakfast observations
- Increased menu options for those who wish to have a smaller portion
- Expanded the role of the ward volunteers
- New soups menu with higher nutritional value
- New contract now in place

#### 4.4 Doctors

### Inpatient Survey 2017: Doctors



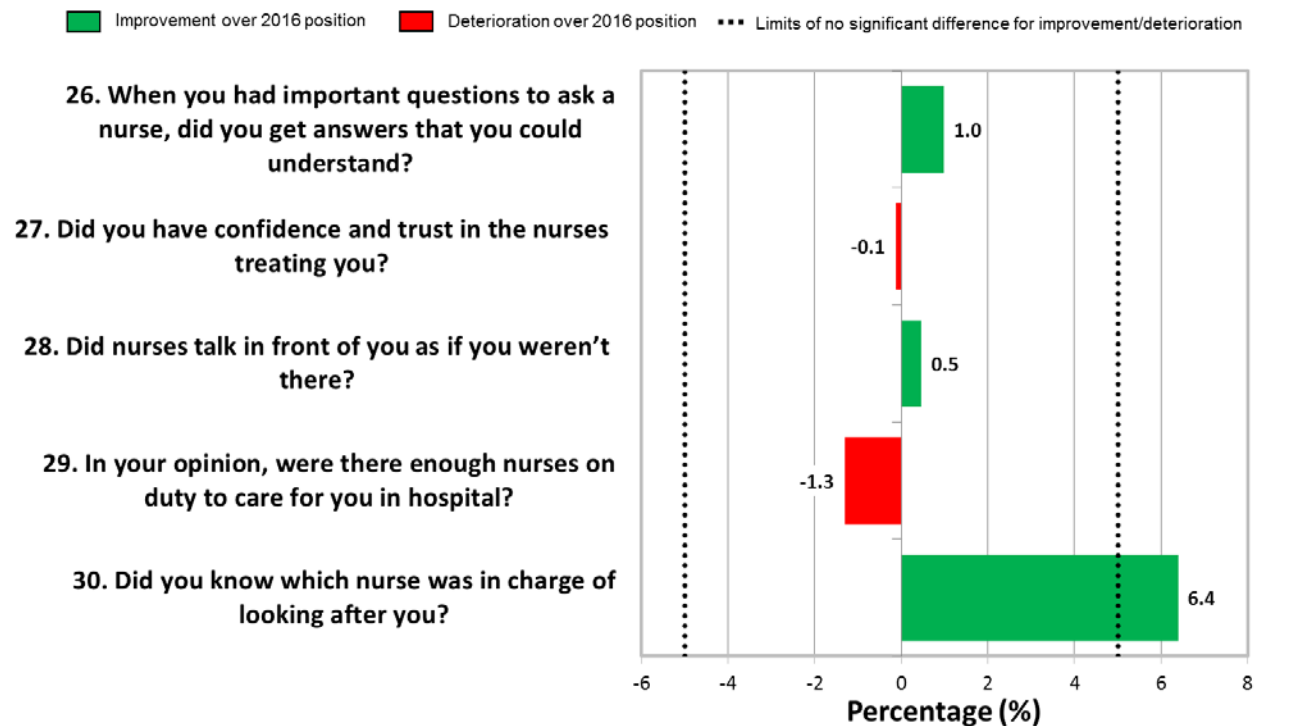
#### Actions taken and future work

- Expansion of the Advanced Nurse Practitioner role – ward based
- Daily Consultant ward round on cardiac surgical wards and planned for cardiology in the Autumn 2018
- Results shared with the medical staff in medicine and will be shared with surgical medical staff at a future audit day

## 4.5 Nurses

The Trust was rated second in the country for the questions regarding nursing.

### Inpatient Survey 2017: Nurses



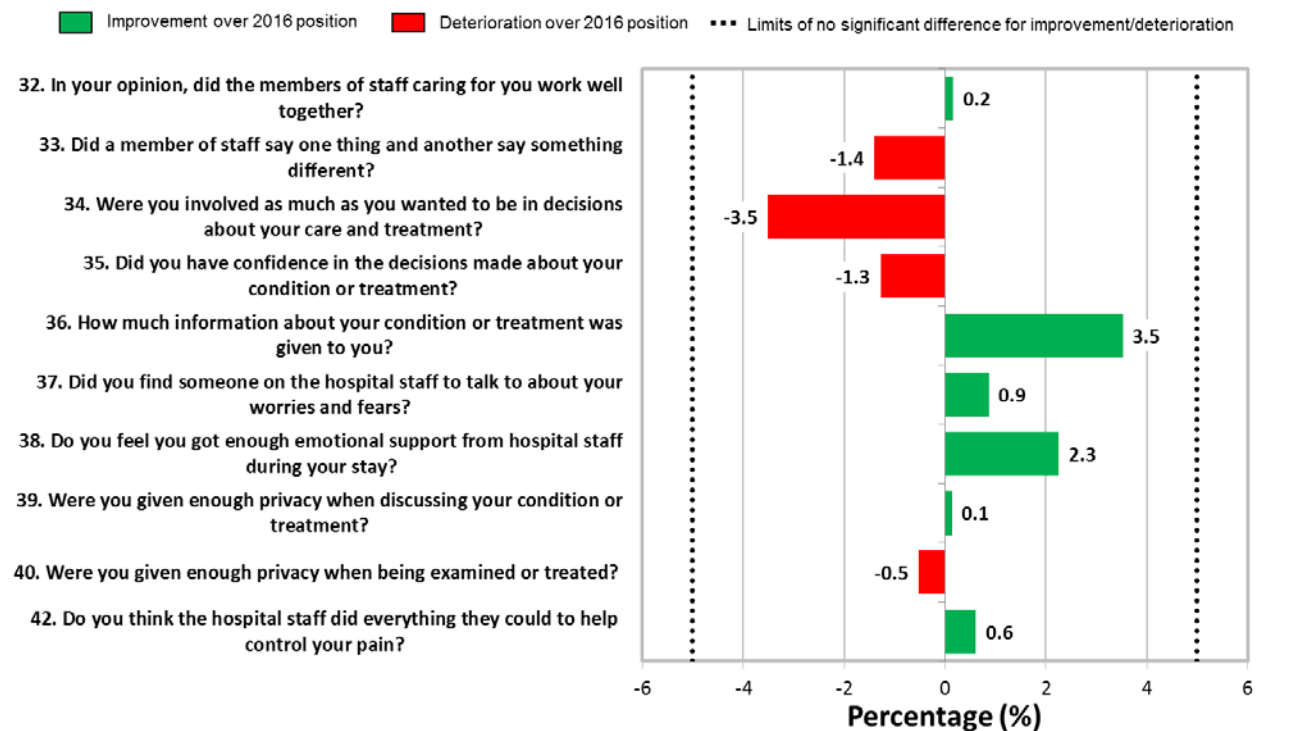
. Some further areas for improvement have been :

- Clinical supervision now in place across the trust
- New care certificate training in place for HCA staff
- Face to face safeguarding level 3 training now in place
- Development of the HCA observation training
- This is me boards
- Published staffing levels on ward monitors

## 4.6 Care and Treatment

The Trust was rated top in the country for this section.

### Inpatient Survey 2017: Care and Treatment



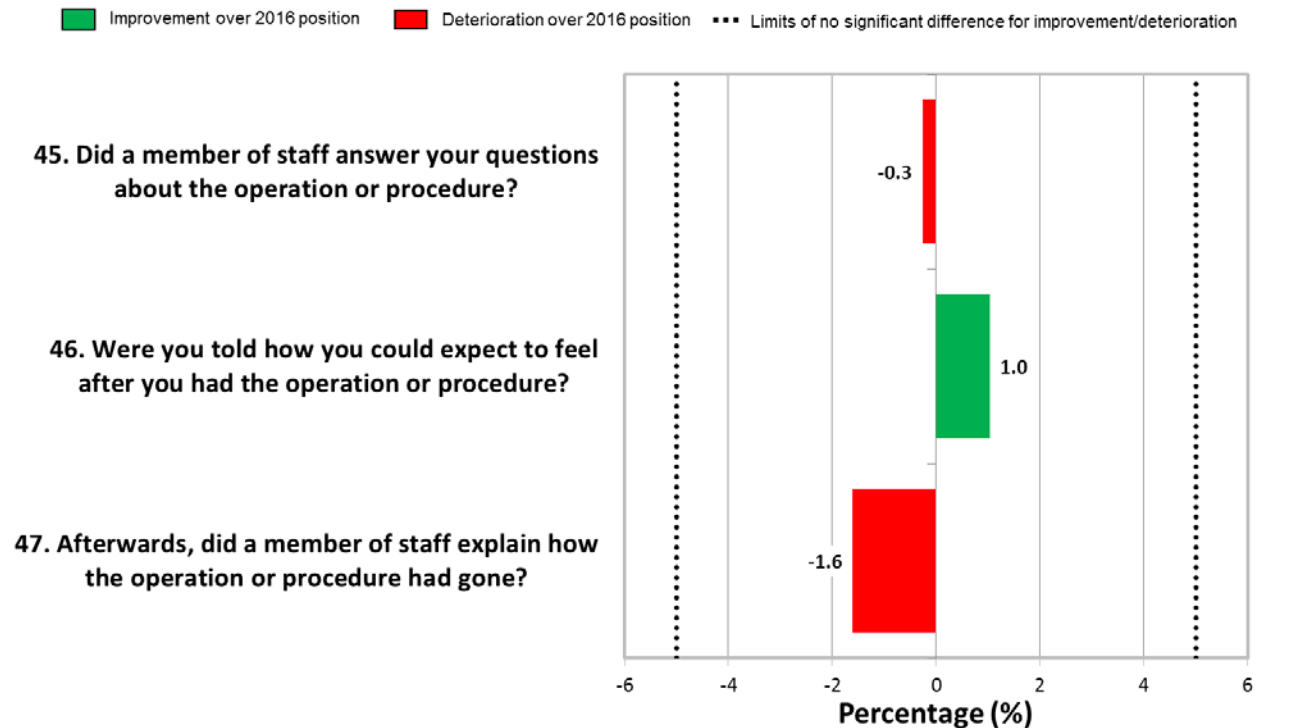
#### **Actions taken and future work**

- New Comfort Check proposal work across all wards now all electronic
- New multifactorial falls assessment
- Introduction of frailty screen across all areas
- Cancer support workers appointed and due to commence shortly in surgery. Will support, signpost and guide thoracic patients with cancer. Holistic needs analysis and end of treatment summaries will be completed.
- Letter generated through EPR to inform GP if patients have had an inpatient fall
- Patient flow work in place
- Falls improvement work in place



## 4.7 Operations and procedures

### Inpatient Survey 2017: Operations and Procedures

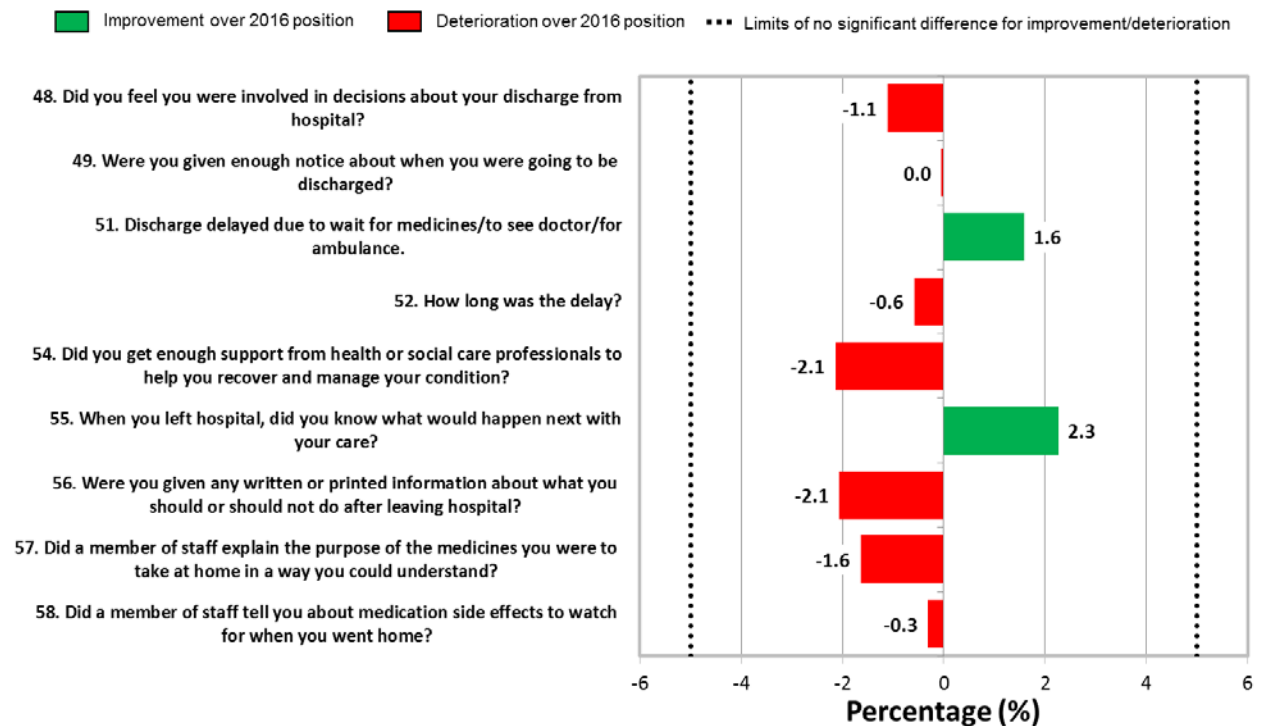


#### **Actions taken and future work**

- Expansion of the ANP role within critical care to include early discharge support and education
- Outreach team – family and friends information and drop in sessions
- Roll out of teach back on all areas
- Patient flow project
- Development of new pre-operative sessions for patients and families
- Pre op visits from theatre staff now in place
- Post op phone calls from theatre

## 4.8 Discharge

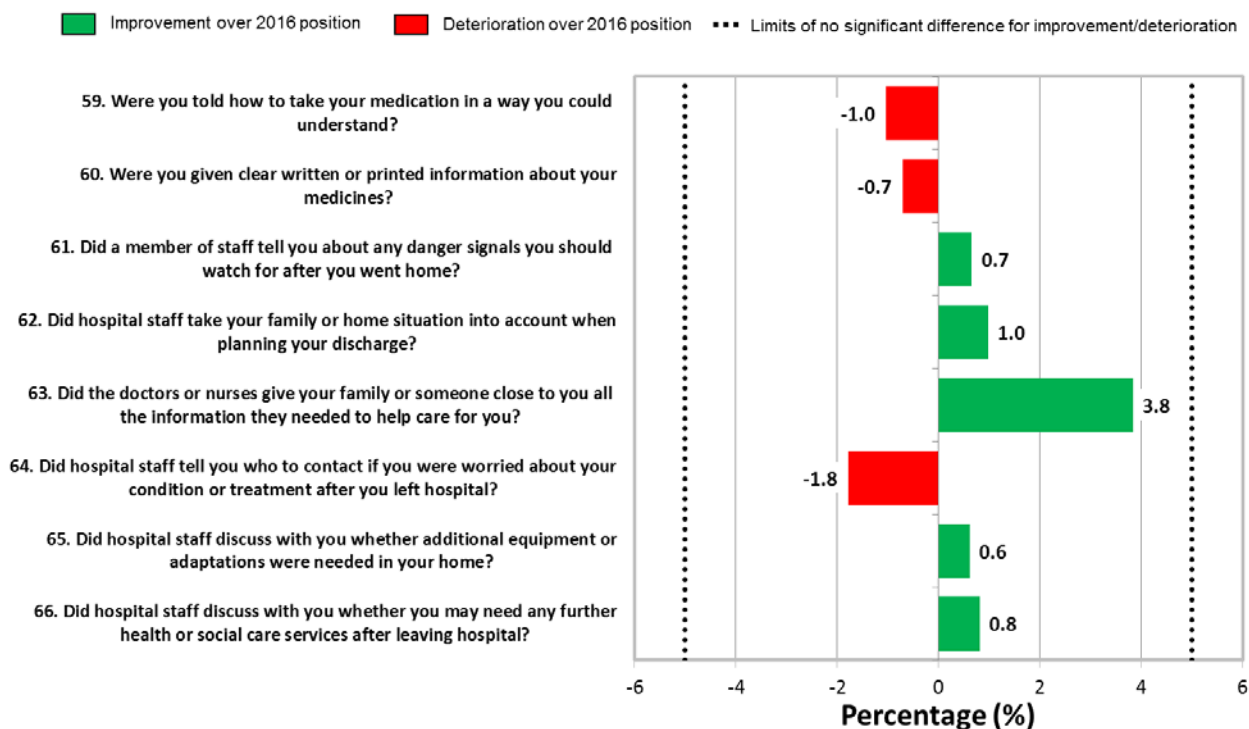
### Inpatient Survey 2017: Leaving Hospital (1)



#### **Actions taken and future work**

- Introduction of Same day admission
- Any inpatients have pre op visit from theatre staff.
- Telephone call to families once relative out of theatre
- Clinical Utilisation Cquinn in place with supportive improvement work on discharge – this involves pharmacy, ward staff and coordinators.

## Inpatient Survey 2017: Leaving Hospital (2)

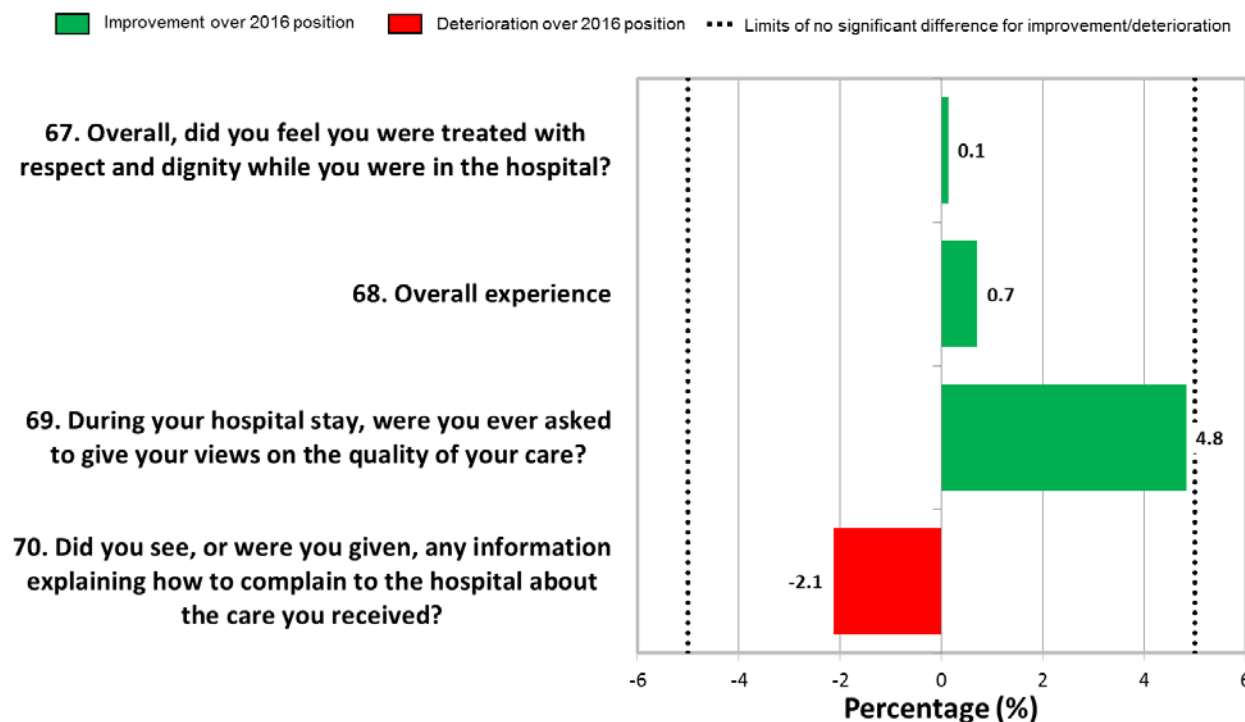


### **Actions taken and future work**

- CUR work as above involving all disciplines
- Trial of discharge pass as part of CUR work stream
- Care partner programme (quality priority)

## 4.9 Overall

### Inpatient Survey 2017: Overall Views



#### **Actions taken and future work**

- New complaints posters made available
- Information on how to make a complaint is now included in the OPD leaflet
- EECS assessments for wards and departments
- HALT for families in place
- Proactive walk rounds from the patient and family support team across the wards

## **5.0 Summary and Next Steps**

The Trusts performance in the national in-patients survey 2017 is excellent being rated top in the country for overall care. Despite this there are improvements that can be made to further improve. The Trusts focus on the six steps of the patient and family experience from reputation to after stay have clearly supported a focus on the patient journey in LHCH however, the Trust needs to further improve the whole of the patient pathway from the referral into the Trust and the care after discharge. The patient and family experience six steps will be reviewed later this year to refocus on the priorities for care for patients and families accessing care at LHCH.

## **6.0 Recommendations**

The Board of Directors are requested to:

- Note the results of the survey and the progress made
- Note that the Quality Committee will review the detail of the report at its meeting in July 2018 and discuss the areas for improvement and the actions to address