

Trust Board Meeting in Public: Wednesday 8 July 2020

TB2020.63

Title	National Inpatient Survey 2019
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Status	For information and approval
History	Paper presented at TME on 25 June 2020

Board Lead(s)	Sam Foster, Chief Nursing Officer			
Key purpose	Strategy	Assurance	Policy	Performance

National Inpatient Survey 2019

1. Purpose

1.1. The purpose of the paper is to:

- Provide the background details of the National Inpatient Survey programme and any changes that were made to the 2019 survey.
- Explain the results from the 2019 National Inpatient Survey and provide a comparison against Trust's results from 2018.
- Provide details of dissemination plans and next steps.
- Explain the changes to the 2020 survey; planned to commence in December 2020 (November is adjusted sampling month).

2. Background

2.1. The National Inpatient Survey has been conducted annually since 2005. The CQC uses results of the survey for regulatory activities such as registration, monitoring ongoing compliance and reviews.

2.2. The Trust has employed Patient Perspective, an approved survey contractor for the National Patient Survey Programme, since 2006 to carry out the survey on its behalf.

2.3. The survey is carried out via paper questionnaires which are mailed to patients' houses. Two reminder letters are sent following the initial letter and questionnaire. There is an option for patients to call a helpline number for support to complete the questionnaire, which includes the option to complete it in over 300 languages via telephone interpreting.

2.4. The 2019 survey sample included patients who were discharged in July 2019 and met the following criteria: Over the age of 16, admitted through both planned and emergency routes, and had more than one overnight stay. Patients were excluded from the sample if they were: maternity patients, patients who had a planned termination of pregnancy, day cases and private patients (non-NHS). Any patients who died since their hospital stay were also removed from the sample.

2.5. Respondents were asked 82 questions in total, 72 questions about their care, 10 additional demographic questions and three open 'free text' comments questions. Questions about care covered a number of themes including admission and discharge, communication, medication, and privacy and dignity.

2.6. The following questions were amended for 2019, and so it is not possible to compare with previous years:

- Q51: One response option was changed from "I had to wait for an ambulance" to "I had to wait for hospital transport".
- Q66: The wording of the question was amended from "Was the care and support you expected available when you needed it?" to "After being

discharged, was the care and support you expected available when you needed it?"

3. Additional Sample

- 3.1. As in 2017 and 2018, the Trust commissioned an additional sample of 3314 patients (at an extra cost of £7500) meaning that 4564 surveys were sent out in total. For the additional sample, 1511 were returned, giving a response rate of 47.3%
- 3.2. The additional sampling allows for feedback to be examined at ward level, giving the data more meaning for teams. Increasing overall respondents increases the number of respondents per ward and allows the data to be broken down while protecting patient anonymity. When a ward receives 30 or more responses, a report is generated by Patient Perspective.
- 3.3. From the 2019 survey 42 out of 72 wards) had a sufficient number of responses in order to receive a ward level report.
- 3.4. These reports have been distributed to nominated divisional representatives and Ward Managers. They will be asked to use the results to make local improvement plans.
- 3.5. The data received from the additional sample is only for internal use. These results do not form part of the national publication by the CQC.

4. Overview of Trust Results

- 4.1. Results are yet to be published by the CQC and are therefore embargoed until the publication date (scheduled for 2 July 2020).¹
- 4.2. Of the mandatory sample, 550 surveys returned, giving the Trust a response rate of 45.6%. This is an increase of nearly 3% compared to 2018 (42.9%).
- 4.3. Patient Perspective compares the Trust's results with the most recent national results to give an indication of overall performance. For the 2019 results, comparing with the 2018 national data, the Trust falls within the top 20% of trusts on 33 questions, the middle 60% on 26 questions, and the bottom 20% on one question (Was your admission date changed by the hospital?). These findings are improved from last year's results (2018) when compared to the 2017 data when the Trust scored in the top 20% for only nine questions, the middle 60% for 46 questions and the bottom for four questions.
- 4.4. The questions no longer in the bottom 20% were:
 - 4.4.1. Were you given enough privacy when being examined or treated in the A&E department?
 - 4.4.2. Did the hospital staff explain the reasons for being moved in a way you could understand? (applicable to patients who were moved from one ward to another at night)
 - 4.4.3. During your hospital stay, were you ever asked to give your views on the quality of your care?

¹ When results are published, they will be available at <http://www.cqc.org.uk/inpatientsurvey>

- 4.5. Patients were asked if their most recent hospital stay was planned in advance or an emergency: 56% were emergency or urgent, 40% were waiting list or planned in advance, and 4% indicated their stay as 'something else'.
- 4.6. According to the pre-publication results, provided on 15 May by the CQC, the Trust's average score was 78.2%, an increase of 1.2% on the 2018 average of 77%.
- 4.7. These CQC pre-publication results also show that the Trust's scores were significantly improved from the previous year for **five** questions and significantly reduced this year for **no** questions. The questions that were significantly improved were:
- While you were in the A&E Department, how much information about your condition or treatment was given to you?
 - In your opinion, how clean was the hospital room or ward that you were in?
 - If you needed attention, were you able to get a member of staff to help you within a reasonable time?
 - Did the doctors or nurses give your family, friends or carers all the information they needed to help care for you?
 - Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?
- 4.8. These CQC pre-publication results also show that the Trust has scored better than most other Trusts on **eight** questions (some are the same as above). These were:
- While you were in the A&E Department, how much information about your condition or treatment was given to you?
 - During this hospital stay, did anyone discuss with you whether you would like to take part in a research study?
 - If you needed attention, were you able to get a member of staff to help you within a reasonable time?
 - Do you think the hospital staff did everything they could to help control your pain?
 - Did the doctors or nurses give your family, friends or carers all the information they needed to help care for you?
 - Did a member of staff tell you about any medication side effects to watch for when you went home?
 - Were you given clear written or printed information about your medicines?
 - Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?
- 4.9. For the question 'Overall, how good was your experience (0 = very poor, 10 = very good)', there was a 2% increase in the Mean Rating Score (MRS)²

² The mean rating score is calculated by allocating a 'weight' to each response. Positive responses (e.g. very good) are allocated a higher weighting than negative responses (e.g. very poor). An average for each question is then calculated, with higher scores indicating a more positive patient experience.

from 2018 to 2019. The score for 2019 was 84.9%.

4.10. Patients were asked a set of demographic questions within the questionnaire. The results of these questions are presented in Appendix 2. Some key points from the data are:

- The largest age group was 66-81, with 42% of participants falling in this age category.
- The male to female ratio was 48.4%: 51.6%.
- 94.5% of respondents were white. The largest representation from other ethnic groups was those from Asian or Asian British (2.4%), followed by Black or Black British (1.7%).
- 64% of respondents indicated that they had physical or mental health conditions, disabilities or illnesses which had lasted or were expected to last for 12 months or more.

4.11. Comparing these data with the population of Oxford City, according to the 2011 census³:

- The survey participants' age group was disproportionate to the largest age group within census, whereby the largest age group within Oxford city is 20-24 years. Oxford City is known to have a disproportionately young population, mainly due to the student population.
- The population was similar in terms of male: female (49.6%: 50.4%).
- The ethnicity of the population of Oxford in 2011 was 78% white and 3% representation from each of the following ethnicities: Indian, Pakistani, Asian and Black African.
- In terms of disability, 88% of the population indicated that any health problems or disability they had (having lasted or expected to last 12 months or more) did not limit their day to day activities (5% said they were limited 'a lot' and 7% said they were limited 'a little'). The census does not include what percentage of the population has a disability.

4.12. The demographic data for all OUH inpatients (16+) discharge in July 2019 was obtained and provides the following comparative data:

- The male to female ratio was 47%: 53%.
- 76% were of a white background. The largest proportion of patients who were non-white was comprised of 1.2% Asian or Asian British (this is the same as the survey results). Around 18% of patients were recorded as 'not stated' or 'not known'.
- In terms of age, the largest proportion of patients came into the range of 66 – 80 which is mirrored in the survey respondents.

³ https://www.oxford.gov.uk/downloads/download/311/census_2011_statistics

5. The Trust's results in detail

5.1. The Trust has two ways of comparing scores on the survey to other trusts:

- The CQC calculates an 'expected range', defined as:

"The better / about the same / worse categories are based on the 'expected range', which is calculated for each question. This is the range within which we would expect a particular trust to score if it performed about the same as most other trusts in the survey. The range takes into account the number of respondents from each trust as well as the scores for all other trusts, and allows us to identify which scores we can confidently say are 'better' or 'worse' than the majority of other trusts".⁴

Scores are standardised between Trusts to account for demographic differences. The way the CQC expected range is calculated means that most trusts are about the same, and few are 'worse' or 'better'.
- Patient Perspective, our survey supplier, calculates which trusts are in the top 20%, middle 60% and bottom 20% using data from the previous year (the most recent available published data). This method means there are always some Trusts which are in the top or bottom 20% and enables more detailed comparisons to be made.⁵

5.2. Appendix 1 shows the questions for which the Trust was benchmarked above other trusts by Patient Perspective and or by the CQC.

5.3. The Trust was benchmarked below other trusts in one question (Was your admission date changed by the hospital) by Patient Perspective but this was not picked up on by the CQC as worse than other Trusts and the score improved by 1% point (from 87.8 to 88.6) from the previous year.

5.4. A lower comparative score for admission dates could demonstrate that there is potentially a higher demand for planned admissions than the Trust can accommodate. Reducing cancellations of planned admissions is one of the ten focus areas of the Patient Experience Delivery Plan and a Quality Priority for 2020/21. In 2018 there were four questions on which the Trust was rated as 'worse' than other trusts.

5.5. There were several questions where the Trust's score changed significantly since 2018. One question had a reduced score and there were improvements on eight questions (shown in Appendix 1).

5.6. The reduced score (of 5%) was for Q64 "Did hospital staff discuss with you whether you would need any additional equipment in your home, or any adaptations made to your home, after leaving hospital?" The Trust is working closely with the Home Assessment Reablement Team (HART) as part of the

⁴ CQC national inpatient survey technical document
https://www.cqc.org.uk/sites/default/files/20190620_ip18_technicaldocument.pdf

⁵ There are two ways of comparing scores over time. Patient Perspective defines a change as a difference of 5% or more in the score. The CQC use t-tests to compare the Trust's score since the previous year. However, the CQC compares the Trust's standardised score from 2018 and 2019, which means the actual scores the Trust achieved are not compared.

'Home First' focus area of the Patient Experience Delivery Plan to improve communication with patients and their relatives/carers about support at home following discharge.

- 5.7. The Emergency Department (ED) was under particular pressure in 2019 and this may account for patient's feedback in relation to privacy. The Trust's ED is being extended, in order to increase capacity for clinical care as well as a bespoke clinical area with sound barriers in the new resuscitation area (resus) and a bespoke relative's room. Patient privacy is often affected by the space restrictions in the ED department being too small for the attendances and therefore patients are not always assessed or seen in areas designed for treatment or assessment.

6. Analysis of coded comments

- 6.1. Each comment provided by respondents (in the core sample) was read and coded by a trained coder at Patient Perspective. Overall there were more positive (485) than negative (298) comments. Whilst comments about treatment and care and staff, were more positive than negative, three quarters of the comments about the hospital environment and facilities were negative. Comments about the pathway of care were almost equally positive and negative.
- 6.2. The comments were divided into four key topic areas as shown in Table 1.

Table 1

	The pathway of care	Care and treatment	Staff	Hospital environment and facilities
Positive comments (n)	69	136	247	33
Negative comments (n)	66	87	56	89
Total	135	223	303	122

- 6.3. Within comments categorised as 'pathway of care', just under half of the negative feedback was related to discharge and care after leaving hospital/follow up.
- 6.4. Within comments categorised as 'care and treatment', a third of the negative comments were about communication or information giving by staff.

6.5. Particular areas highlighted in the analysis of the comments are shown in Fig 1.

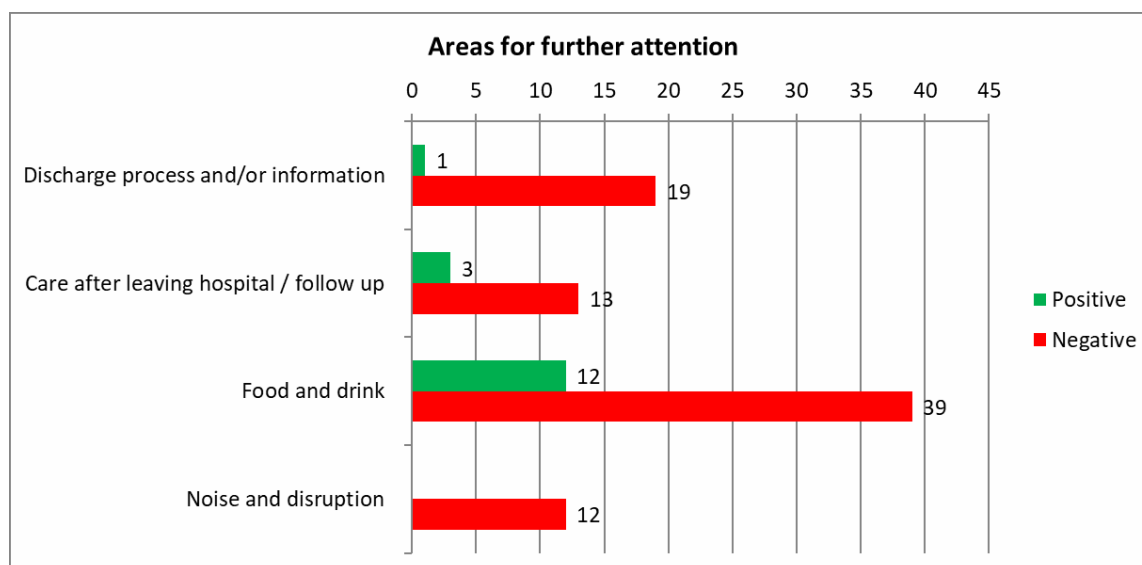


Fig 1 - Analysis of comments

6.6. Appendix 3 shows the detailed breakdown of comments analysis for the full set of results, including the additional sample.

7. Dissemination of results

7.1. The Patient Divisional Directors of Nursing received the Patient Perspective headline report and some key data points on 6 May 2020.

7.2. The Trust, divisional, directorate and ward level results was sent to nominated divisional representatives on 28 May 2020. Divisional representatives were asked to share the results accordingly and to send individual ward reports to each ward manager.

7.3. A summary of results were included in the Patient Experience Annual Report which was presented by the Chief Nursing Officer to the Integrated Assurance Committee on 10 June.

7.1. Webinars will be held in July 2020 (exact dates to be confirmed, but CQC benchmark data will be available mid-month) with Patient Perspective and the Divisional Leads in order to discuss results and establish where improvements could be made. Divisional leads will be asked to establish local action plans, including those on each ward where an individual report has been received, and to monitor these. Progress updates will be requested by the Patient Experience Team on a regular basis.

7.2. Feedback specific to certain areas, particularly the negative comments, will be communicated to the relevant teams for appropriate action to be taken:

- The negative responses relating to food and drink will be shared with the Nutrition and Dietetics team via the Acute Dietetic Service Manager.
- Results pertaining to discharge processes as well as patients' negative feedback about care after leaving hospital will be discussed at the

Bridging the Discharge Gap group, chaired by the Deputy Director of Urgent Care.

- The negative comments relating to noise and disruption will be considered as part of the focus on reducing noise at night within the Patient Experience Delivery Plan and will be communicated to the clinical teams involved in the project.

7.3. As a whole, the survey results will inform the detailed planning for the second year of the Patient Experience Delivery Plan.

8. Adult Inpatient Survey 2020

8.1. The 2020 Adult Inpatient Survey has been delayed due to COVID-19. The patient sample should have been in July but it was announced on 15 May 2020 that patients would be sampled from November 2020. Trusts will be required to draw their samples in December and fieldwork will take place between January and May 2021.

8.2. The CQC Surveys Team announced a plan to move from a paper-only method to a 'push-to-web' method; meaning patients will be offered the option of completing the questionnaire online in the first instance before being offered a paper questionnaire. In addition to postal invitations and reminders, patients will also receive text message (SMS) reminders containing a direct link to the online survey.

8.3. In the pilot testing of this new method at least half of respondents completed questionnaires online. SMS reminders have been fundamental in helping to increase online completion, and response rates are better where trusts are consistently recording patient mobile numbers.

8.4. Changing the way patients are asked for feedback will change the way patients' respond, and will mean that it is not possible to compare the results from the 2020 survey with previous years. The CQC Survey Team has therefore used this opportunity to review all aspects of the survey design and opted to permanently change the sample month to November (from July). The Trust, along with others, was part of this consultation.

8.5. On 5 June the CQC Surveys Team provided a draft copy of the proposed 2020 questionnaire to the Patient and Public Engagement Lead and a number of other Patient Experience leads at other trusts who were involved in the consultation work thus far. All recipients were asked to review the questionnaire and provide comments. Members of the OUH Patient Experience Team, including the Children's Patient Experience Leads, Patient Information Officer and the Equality and Diversity Lead provided comments and suggested changes. The edited version was returned to the Surveys Team on 12 June.

8.6. Following feedback from trusts and stakeholders, the CQC Surveys Team will review the questionnaire and then proceed with cognitive testing with service users/patients.

8.7. It is expected that the sampling month will go ahead in November 2020 with fieldwork in January 2021.

9. Conclusion

- 9.1. The results will be published by the CQC on 2 July 2020. The Trust will disseminate external communications at the same time.
- 9.2. There were some significant positive changes between 2018 and 2019 results with some areas for improvement highlighted.
- 9.3. The results are positive overall and teams should be commended for their commitment to patient centred care. The Patient Experience Team will work with the Divisions to celebrate the success that were seen in; i) Confidence and trust in doctors and nurses, ii) Help, support and information giving by staff and iii) Overall experience of being in hospital.
- 9.4. A focus will be placed on the areas that were identified for improvement, namely i) Discharge process/information and follow up, ii) Food and iii) Noise at night (however the Trust scored in the top 20% of Trusts on this question).
- 9.5. Results have been disseminated accordingly via nominated divisional representatives. These representatives will be supported by the Patient Experience Team, and Patient Perspective, to understand the results and put action plans into place. The action plans will be monitored by divisional leads and the Patient Experience Team will request progress updates regularly. Any potential for Trust-wide learning will be identified and communicated accordingly.
- 9.6. The Patient Experience Team will support divisional representatives as required, providing any necessary support with interpretation of the results and development of action plans. The Team will ensure that results are shared with relevant teams and clinical leads across the Trust to promote learning and service improvement where patients have commented or responded less favourably.
- 9.7. According to the demographics of the patient population in July 2019, the survey respondents were a fairly representative group. However, the plans to push to an online method for the 2020 survey should increase the response rate from younger patients and hopefully a more diverse range of patients. The Trust will take steps to attempt to reach more seldom heard groups by advertising the survey in other languages and promoting the availability of translation services when accessing the questionnaire.

10. Recommendation

- 10.1. The Trust Board is asked to note and approve the contents of this report.

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Appendix 1: Survey results for 2019, 2018 and National Comparisons

Q #	Question	MRS 2018	MRS 2019	Change Since 2018	Top/middle/bottom 20% national comparison	CQC national comparison	CQC analysis of change in Trust's score since 2018
3	While you were in the A&E Department, how much information about your condition or treatment was given to you?	83.3 %	90.0%	7%	Top 20%	Better	Improved
7	Was your admission date changed by the hospital?	87.8 %	88.6%	1%	Bottom 20%		
13	Did the hospital staff explain the reasons for being moved in a way you could understand?	72.1 %	74.7%	3%	Top 20%		
14	Were you ever bothered by noise at night from other patients?	66.2 %	68.1%	2%	Top 20%		
15	Were you ever bothered by noise at night from hospital staff?	81.2 %	85.1%	4%	Top 20%		
17	Did you get enough help from staff to wash or keep yourself clean?	83.3 %	84.1%	1%	Top 20%		
23	When you had important questions to ask a doctor, did you get answers that you could understand?	84.8 %	85.6%	1%	Top 20%		
24	Did you have confidence and trust in the doctors treating you?	92.0 %	93.0%	1%	Top 20%		
26	When you had important questions to ask a nurse, did you get answers that you could understand?	85.3 %	86.5%	1%	Top 20%		
27	Did you have confidence and trust in the nurses treating you?	91.1 %	91.4%	0%	Top 20%		
28	Did nurses talk in front of you as if you weren't there?	91.6 %	91.5%	0%	Top 20%		
29	In your opinion, were there enough nurses on duty to care for you in hospital?	79.2 %	81.1%	2%	Top 20%		
30	Did you know which nurse was in charge of looking after you?	72.1 %	71.2%	-1%	Top 20%		
32	In your opinion, did the members of staff caring for you work well together?	88.4 %	88.6%	0%	Top 20%		

Q #	Question	MRS 2018	MRS 2019	Change Since 2018	Top/middle/bottom 20% national comparison	CQC national comparison	CQC analysis of change in Trust's score since 2018
34	Were you involved as much as you wanted to be in decisions about your care and treatment?	75.1 %	77.4%	2%	Top 20%		
35	Did you have confidence in the decisions made about your condition or treatment?	84.6 %	87.8%	3%	Top 20%		
36	How much information about your condition or treatment was given to you?	89.3 %	91.4%	2%	Top 20%		
38	Do you feel you got enough emotional support from hospital staff during your stay?	73.9 %	74.4%	0%	Top 20%		
39	Were you given enough privacy when discussing your condition or treatment?	86.3 %	88.8%	2%	Top 20%		
42	Do you think the hospital staff did everything they could to help control your pain?	85.9 %	87.0%	1%	Top 20%	Better	
43	If you needed attention, were you able to get a member of staff to help you within a reasonable time?	79.3 %	84.3%	5%	Top 20%	Better	Improved
45	Beforehand, did a member of staff answer your questions about the operation or procedure in a way you could understand?	91.0 %	91.2%	0%	Top 20%		
47	After the operation or procedure, did a member of staff explain how the operation or procedure had gone in a way you could understand?	84.3 %	85.0%	1%	Top 20%		
49	Were you given enough notice about when you were going to be discharged?	72.8 %	75.2%	2%	Top 20%		
55	When you left hospital, did you know what would happen next with your care?	67.4 %	69.9%	2%	Top 20%		
56	Before you left hospital, were you given any written or printed	68.6 %	68.8%	0%	Top 20%		

Q #	Question	MRS 2018	MRS 2019	Change Since 2018	Top/middle/bottom 20% national comparison	CQC national comparison	CQC analysis of change in Trust's score since 2018
	information about what you should or should not do after leaving hospital?						
58	Did a member of staff tell you about medication side effects to watch for when you went home?	51.8 %	56.8%	5%	Top 20%		
59	Were you given clear written or printed information about your medicines?	80.4 %	81.7%	1%	Top 20%		
60	Did a member of staff tell you about any danger signals you should watch for after you went home?	56.4 %	59.5%	3%	Top 20%		
61	Did hospital staff take your family or home situation into account when planning your discharge?	74.0 %	75.3%	1%	Top 20%		
62	Did the doctors or nurses give your family, friends or carers all the information they needed to help care for you?	63.4 %	71.8%	8%	Top 20%	Better	Improved
63	Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?	79.7 %	84.7%	5%	Top 20%	Better	Improved
68	Overall, how good was your experience (0=very poor, 10= very good)?	83.2 %	84.9%	2%	Top 20%		
69	During this hospital stay, did anyone discuss with you whether you would like to take part in a research study?	not available	26.3%	not available	not available	Better	
71	Did you see, or were you given, any information explaining how to complain to the hospital about the care you received?	23.8 %	22.5%	-1%	Top 20%	Better	

Appendix 2: Demographic information about respondents**Proportions responding to the survey by age**

	%	Number
16 - 35	6.55	36
36 - 50	9.82	54
51 - 65	22.73	125
66 - 80	41.64	229
81+	19.27	106
Total specific responses	100.00	550
Missing data	0.00	0

Proportions responding to the survey by sex

	%	Number
Male	48.55	267
Female	51.45	283
Total specific responses	100.00	550
Missing data	0.00	0

Q82: What is your ethnic group?

	%	Number
White	94.54	502
Multiple ethnic groups	1.13	6
Asian or Asian British	2.45	13
Black or Black British	1.69	9
Arab or other ethnic group	0.19	1
Total specific responses	100.00	531
Not known	0.00	19
Missing data	0.00	0

Q74: Do you have any physical or mental health conditions, disabilities or illnesses that have lasted or are expected to last for 12 months or more?

	%	Number
Yes	64.29	306
No	35.71	170
Total specific responses	100.00	476
Missing responses	0.00	74

Appendix 3: Data tables – coded comments

Count of thematically coded comments	Total positive	Total negative	Total
	1819	1150	2969

Totals	Positive	Negative	Totals
Pathway of Care	110	266	376
Care and Treatment	562	283	845
Staff	1003	234	1237
Hospital Environment/Facilities	144	367	511

Pathway of Care	Positive	Negative	% Negative
Waiting/access	32	63	66%
Cancelled treatment	1	7	88%
A&E/Emergency department	8	13	62%
Admission to hospital	6	15	71%
Hospital/ward stay	48	6	11%
Discharge process and/or information	2	79	98%
Care after leaving hospital/follow up	5	47	90%
Organisation and administration	4	15	79%
Moving wards	1	11	92%
Transport	3	10	77%
Total	110	266	71%

Care and Treatment	Positive	Negative	% Negative
Care and treatment general	458	37	7%
Operations, investigations/procedures	22	18	45%
Continuity of care	0	13	100%
Patient's involvement in decisions re. care/treatment	3	2	40%
Staff took into account patient's medical history	0	7	100%
Staff took patient's concerns seriously	0	5	100%
Communication/information giving by staff	45	69	61%
Communication between different staff members	6	35	85%
Able to get hold of staff when needed/responsiveness	0	12	100%
Pain management	7	18	72%
Privacy and dignity/respect	18	19	51%
Medication	1	29	97%
Involvement of family/carers	2	7	78%

Record keeping	0	12	100%
Total	562	283	33%

Staff	Positive	Negative	% Negative
Staff general	457	12	3%
Doctors/consultants	194	19	9%
Nurses	280	41	13%
Therapists	3	4	57%
Healthcare assistants / auxiliary staff	14	3	18%
Support staff	33	4	11%
Other staff groups	18	6	25%
Staff skills and training	4	17	81%
Insufficient staff / staff shortages (negative only)		87	100%
Staff negative attitude/rudeness (negative only)		36	100%
Staff giving conflicting/inconsistent advice (negative only)		5	100%
Total	1003	234	19%

Hospital Environment/Facilities	Positive	Negative	% Negative
Environment	19	18	49%
Facilities	35	40	53%
Cleanliness of ward	22	19	46%
Cleanliness of toilets/bathrooms	7	12	63%
Temperature of ward/room/hospital	3	21	88%
Safety and security	2	6	75%
Food and drink	53	161	75%
Noise and disruption	3	55	95%
Parking	0	35	100%
Total	144	367	72%