

Survey Results: 'What makes a good patient feedback exercise?'

The Patients Council designed a 'What makes a good patient feedback exercise' survey to find out: whether patients' felt it was important to gather patient feedback; how and when they would like this to be done; and what they would like to be asked about. The survey had 6 questions. 4 were questions with multiple choice answers provided. The last two required qualitative responses. It was subsequently acknowledged that question 5 was actually 2 questions meaning the survey actually posed 7 questions. The full survey can be found at Annex A.

Copies of the survey were taken to the collective advocacy meetings on the adult and older persons' acute and rehab wards, and the two intensive care wards between 1 and 15 November (11 wards).

Patients who approached the groups were, if Patients Council Members felt it was appropriate, asked whether they would complete the survey. In addition, former and current patients attending the Patients Council meeting rooms over this period were approached to participate. Surveys were also taken along to the Hive for an additional session on 2 November and to the Spiritual Care service of reflection on 7 November.

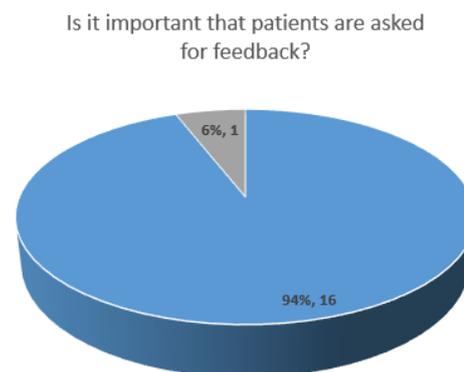
17 patients and 5 non-patient completed the survey (male = 10; female = 12). There was at least one respondent from 8 of the 11 wards (no surveys were completed in Braids, Meadows or Craiglea). The 11 wards have 176 beds, therefore, the results represent nearly 10% of the target population (9.7%). Some patients completed the survey themselves, others responded to questions from the Patients Council Member who filled in the answers, and on one ward, a number of participants took part as a group with the Patients Council Member noting the individual responses against each question.

Question 1: Do you think it is important that patients are asked for feedback about their experiences at the Royal Edinburgh.

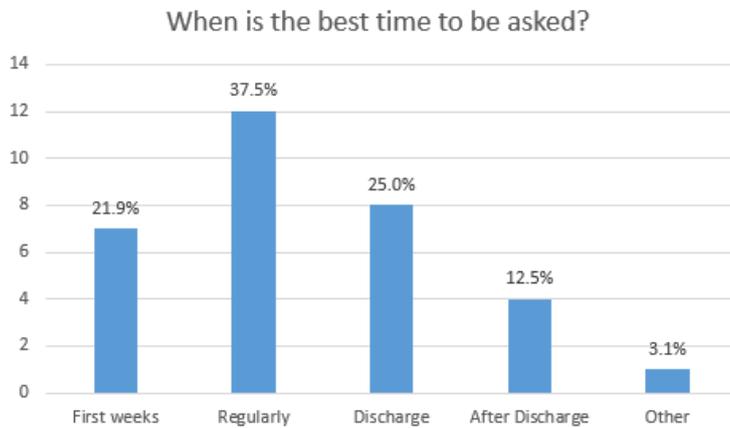
An earlier draft of the survey which did not include this question was mistakenly used for the first five respondents. Therefore, 17 people responded to this question.

The survey gave three options: Yes, No and Other, with a please specify box.

16 (94%) said that yes, it was important. 1 person said it was not. They explained that they felt that giving feedback may put people off the hospital.



Question 2: If you were approached to give feedback on your experience of being an inpatient in the Royal Edinburgh Hospital, when do you think would be the best time to be asked?



The survey gave 5 options: during the first weeks after admission; regularly; in the week before discharge; after discharge; and, other, with a 'please specify box'. Respondents were asked to tick one option, however, if they wished to tick more than one, they were not prevented from doing so. 18 (81.8%) ticked only one.

Over a third of people wished to be asked regularly (N=12; 37.5%). One fifth wished to be asked during the first weeks after admission (N=7, 21.9%) and one quarter in the week before discharge (N=8, 25%). 12.5% (N=4) wished to be asked after they had left hospital and one person said that they did not know under 'other'.

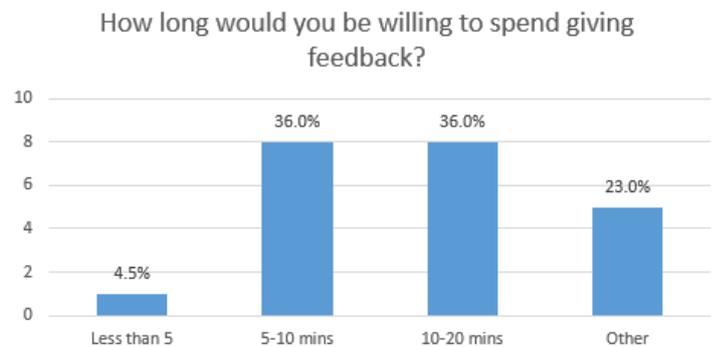
Question 3: How long would you be willing to spend giving you feedback on your experience?

The survey gave 4 options: less than 5; minutes; 5-10 minutes; 10-20 minutes; and, Other with a 'please specify' comment box. Respondents were asked to tick the one option.

8 respondents (36% were willing to spend 5-10 minutes giving their feedback, with another 8, willing to spend 10-20 minutes.

5 people responded 'other'. 3 were willing to spend longer, or 'as long as it took'. 1 said that it would depend on the questions, and the other did not know.

1 person was willing to spend less than 5 minutes.



Question 4: How would you prefer to give your feedback?

The survey gave 6 options: an online questionnaire; a paper questionnaire; a group discussion; answering questions asked by a member of the Patients Council; answering questions by a member of staff; and, other with a 'please specify' box. Respondents were asked to tick all that applied.

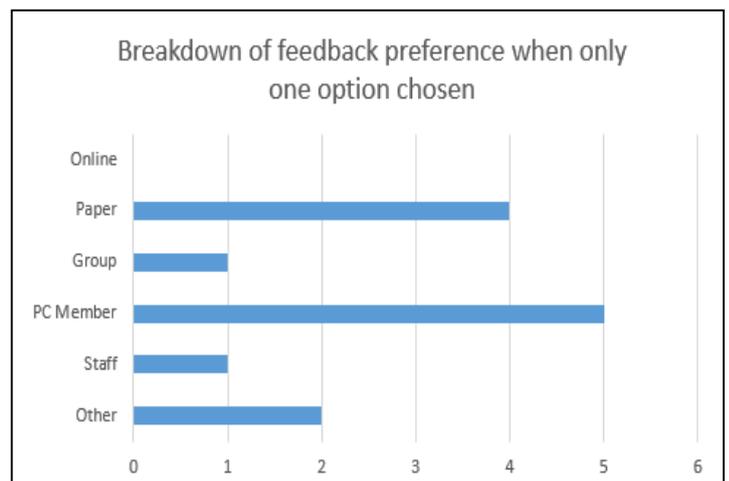
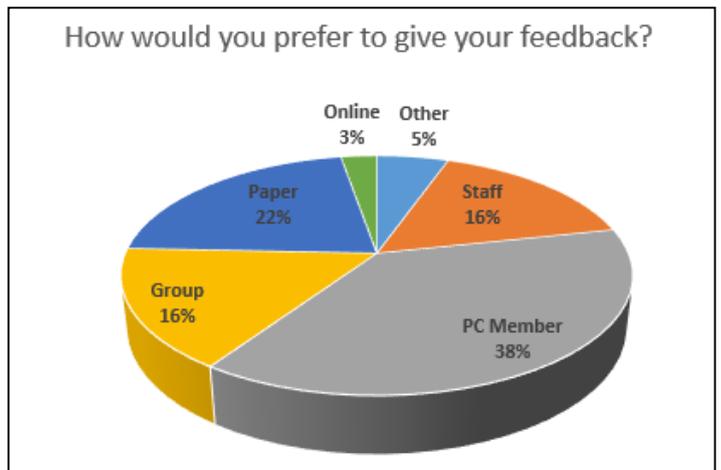
40.9% (N=9) of respondents ticked more than one option accounting for 37 responses overall to this question.

Only one person indicated they would like to respond online. They also noted however that not everyone would have internet access. Two ticked 'other'. One noted they would like to feedback by talking to advocacy, the other said they would do whatever was required.

The most preferred option overall was to respond to questions from a Patients Council Member (N=14, 38%), however, the selection bias of providing surveys to those who attended Patient Council collective advocacy meeting may have influenced this result. The next preferred option was to complete it individually on paper (N=8, 22%).

Completing it with a member of staff or as part of a group was preferred by 16% (N=16%). However, one person felt that it was not appropriate for staff to ask questions.

A separate breakdown of those who selected only one option (N=13), indicated preference for a Patient Council Member (N=5) or paper (N=4).



Question 5: Are there any things that would put you off taking part in a patient feedback exercise? Or, is there anything specific that would make you more likely to take part?

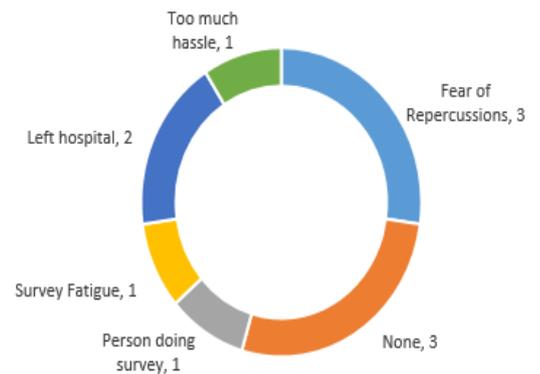
It was acknowledged during data collection that these questions should not have been grouped together. One person wrote 'No' and another 'Don't know' which may have been in answer to one or other of the questions and so were discounted from the analysis.

11 people responded to aspects that would put them off. 3 (27.3% of those who responded to this part) specifically stated that nothing would put them off citing that they felt 'feedback was beneficial' or 'would give them an opportunity to talk about their experience'. 3 indicated that a fear of recrimination or repercussions for their care may inhibit them responding.

2 people indicated that they would not respond once they had left hospital. Other individual barriers were: survey fatigue; if they didn't like the person doing the survey; and, if it was too much hassle.

5 people gave 6 things that would make it more likely that they would participate. 3 suggested that drinks, snack or chocolate were provided, with one of them specifying these should be provided whether or not someone participated. Other things that would make a difference to individual respondents were: having a private space to complete it; to be able to talk and discuss it; and, if they knew it would make a difference.

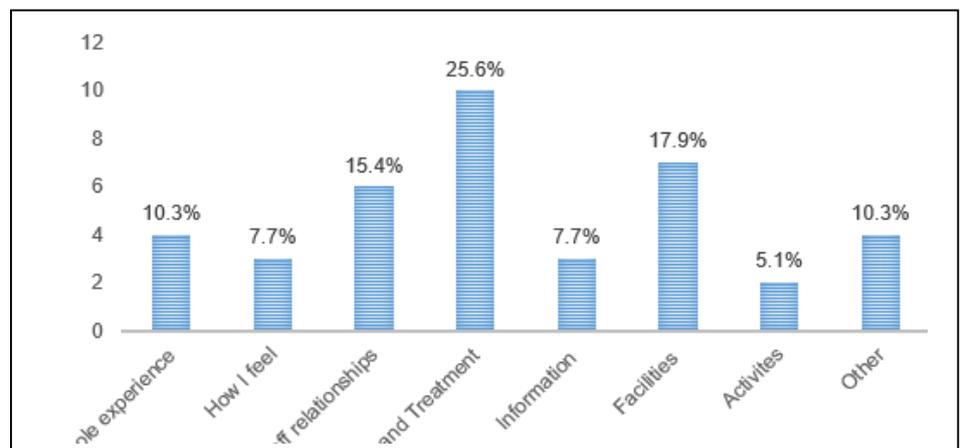
What would put you off taking part?



6. What would you like to be asked about?

17 (77.27%) people responded to this question providing 39 examples of things that they would like to be asked about. An analysis of the issues allowed for 35 issues to be grouped under 7 themes: whole experience; how it feels; staff relationships; care and treatment; provision of information; facilities; and, activities. The remaining 4 were grouped together under 'Other'.

Over a quarter of the issues (25.6% of the 39) related to their care and treatment and were highlighted by over half the people who responded to this question (N=10, 58.8%). Within this, more than person specified issues related to choice; outcome; progress and medication. 17.9% of issues related to facilities (and were raised by 7 people, 41.2%), with both the security of personal property and availability of private space brought up by more than one person. Relationships with staff accounted for 15.4% of the issues. This was brought up by 6 people (35.3%) who highlighted the need for respect, care and accessibility.



7 people indicated they wished to be asked more generally about their experience overall (N=4) or how they have felt while in hospital (N=3). Other aspects raised by more than one person were provision of information (N=3) and activities (N=2).

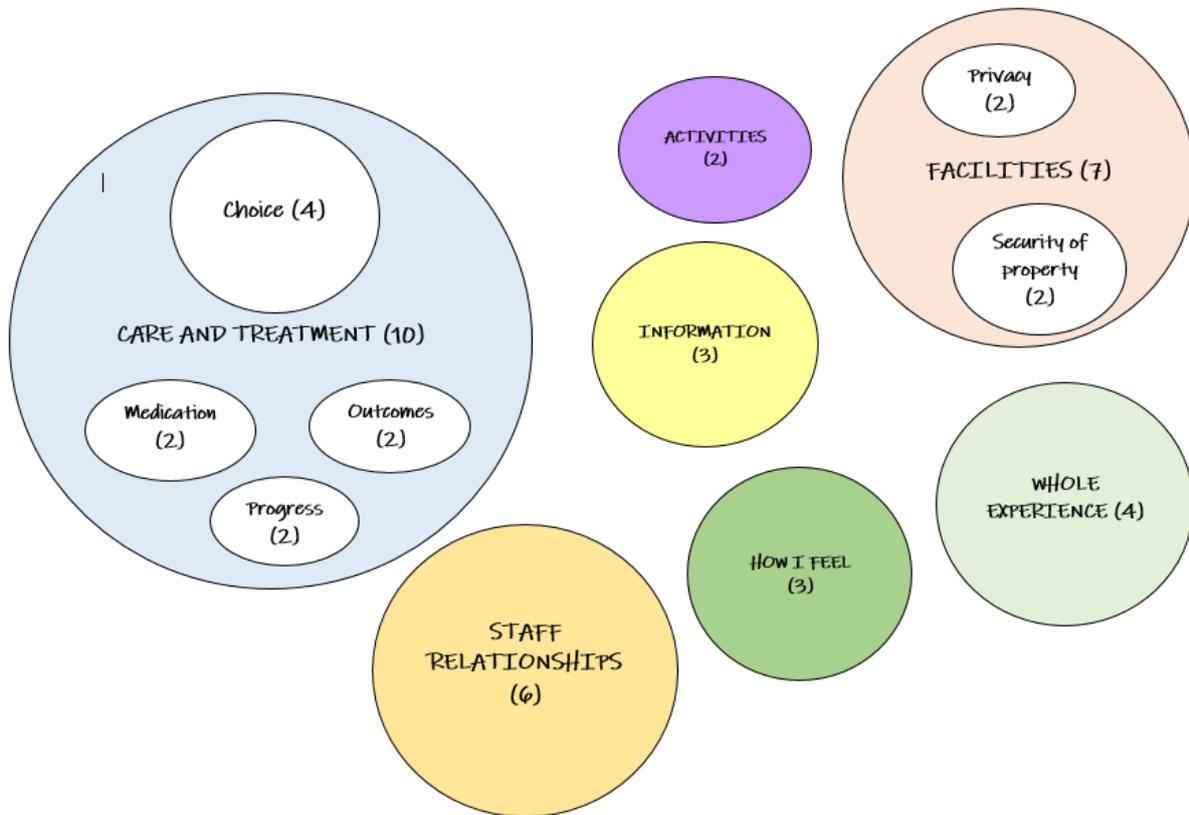
One person highlighted that their answers may change depending on their mood. While another indicated that it was important that the results of any feedback exercise were fed-back to participants and used to make improvements. Family was mentioned 3 times across different themes.

Table 1 give a full breakdown of themes identified, including the quantitative data is presented in the table overleaf. The information is also present in diagram form in Figure 1.

Table 1: What would you like to be asked about? Themes and data.

| | | | |
|---|--|---|---|
| 1. Ask me about my whole experience (4 people raised an issue relating to this) | | | |
| <ul style="list-style-type: none"> - Ask about overall experience; - Open questions about positive and negative that matter to them; - About holistic stay; - Three words to describe the ward. | | | |
| 2. Ask me about how I feel (3) | | | |
| <ul style="list-style-type: none"> - If you feel at ease - How do you feel; - How does it feel to be in the ward? | | | |
| 3. Ask me about relationships with staff (6) | | | |
| <ul style="list-style-type: none"> - If staff are easily accessible - How do you feel about nursing care on the ward; - Staff relationships; - Staff (nurses and rest of MDT) | | <ul style="list-style-type: none"> - Being abused by staff - Respect issues from nurses and staff. | |
| 4. Ask me about my care and treatment (10) | | | |
| Choice: <ul style="list-style-type: none"> - If more choices of treatment are available; - freedom of choice - alternative, individual treatment plan. | Outcome: <ul style="list-style-type: none"> - Hospital not helping - just keeping away from family - Is my mental health improving? | Progress: <ul style="list-style-type: none"> - Length of stay; - Length of stay (should be no more than a couple of years) | Medication: <ul style="list-style-type: none"> - Mental health medication; - Medication. Variation <ul style="list-style-type: none"> - between wards for psychological support. |
| Ask if I was provided with enough information (3) | | | |
| <ul style="list-style-type: none"> - Admission: Not sufficient at time of admission - Rights: When asked to leave, changed from voluntary to involuntary - Medication: Sufficient information on medication | | | |
| Ask me about the facilities in the hospital (7) | | | |
| <ul style="list-style-type: none"> - Security: Patient property - having items stolen; Need for secure a space (had items stolen) - Privacy: Privacy; Need for privacy, both own and with others (e.g. visitors) - Other: Smoking, wifi and food. | | | |
| Ask me about activities in the hospital (2) | | | |
| <ul style="list-style-type: none"> - Variations in resources for cooking, art between wards - The activities available on ward and third sector site-based | | | |
| Other (4) | | | |
| <ul style="list-style-type: none"> - Important that results are fed-back to patients and used to make improvements - What mood I am in may colour my responses - Connections with family - My years with the Patients Council. | | | |

Figure 1: What patients would like to be asked about – Themes and sub-themes



Annex A: Survey



What makes a good patient feedback exercise?

This is a short survey by the Patients Council at the Royal Edinburgh Hospital (<https://rehpatientscouncil.org.uk>). We provide independent collective advocacy to patients and former patients.

We are interested in finding out more about patients' experience of the hospital to further strengthen and represent the patient voice.

With this survey, we want to find out whether patients think it is important to gather patient feedback. We also want to find out how and when patients would like to be asked for their feedback on their experience, and what they would like to be asked about.

- The information will be used to help us decide our next steps for gathering feedback from patients.
- All responses are anonymous and confidential.
- There are 5 questions. Answer only those you wish to.

If you have any questions before or after taking part, please contact Isla Jack:
Patients Council, Andrew Duncan Clinic, REH/
isla.jack@rehpatientscouncil.org.uk

Thank you

1. Do you think it is important that patients are asked for feedback about their experiences at the Royal Edinburgh?

Tick one

- Yes
- No
- Other (please specify)

2. If you were approached to give feedback on your experience of being an inpatient in the Royal Edinburgh Hospital, when do you think would be the best time to be asked ?

Tick one

- During the first weeks after admission
- At regular intervals during your stay
- In the week before discharge
- A few weeks after discharge
- Other (please specify)

3. How long would you be willing to spend giving feedback on your experience?

Tick one

- Less than 5 minutes
- 5-10 minutes
- 10-20 minutes
- Other (please specify)

4. How would you prefer to give feedback on your experience?

*Tick any
that apply*

- Writing responses to questions online
- Writing responses to questions on paper
- As part of a group discussion
- Responding to questions asked by a member of the Patients Council
- Responding to questions asked by a member of staff
- Other (please specify)

5. Are there any things that would put you off taking part in a patient feedback exercise? Or, is there anything specific that would make you more likely to take part?

6. What would you like to be asked about?

This is the end of the survey. Thank you for taking the time to take part. Your answers will now be used to help decide the next steps for gathering feedback from patients.