

**AGENDA ITEM NO:**

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST  
BOARD OF DIRECTORS  
THURSDAY 27 JANUARY 2011**

<b>Title:</b>	<b>NATIONAL CANCER PATIENT EXPERIENCE SURVEY 2010</b>
<b>Responsible Director:</b>	Kay Fawcett, Executive Chief Nurse
<b>Contact:</b>	Carol Rawlings – Associate Director of Patient Affairs, Ext 53608

<b>Purpose:</b>	To provide a summary of the results of the National Cancer Patient Experience Survey to be published in January 2011.
<b>Confidentiality Level &amp; Reason:</b>	<b>None</b>
<b>Medium Term Plan Ref:</b>	Always consider the needs and care of patients first.
<b>Key Issues Summary:</b>	
<b>Recommendations:</b>	The Board of Directors is asked to: <ol style="list-style-type: none"><li>1. <b>Note</b> the 2010 National Cancer Patient Experience Survey report which provides a comparison of the results from NHS Trusts.</li><li>2. <b>Note</b> the contents of this report and the key findings of the survey.</li></ol>

<b>Signed:</b>	<b>Date:</b>
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# UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST

## REPORT TO THE BOARD OF DIRECTORS

THURSDAY 27 JANUARY 2011

### NATIONAL CANCER PATIENT EXPERIENCE SURVEY 2010

#### PRESENTED BY THE EXECUTIVE CHIEF NURSE

#### 1. Introduction

In 2010 the Trust participated in the National Cancer Patient Experience Survey, commissioned by the Department of Health as part of the monitoring programme for the Cancer Reform Strategy published in 2007.

The aim of the survey was to monitor national progress on cancer care to provide information to drive local improvement.

This report presents the results for University Hospitals Birmingham (UHB) and details the comparison between all 158 NHS Trusts that took part in the survey. It highlights areas where UHB compared well against other Trusts, and where it compared less favourably.

The last national survey of cancer patients took place in 2000. However, the survey in 2000 was of just three tumour groups; breast, colorectal and prostate. The questions used in the 2010 survey have changed significantly, as has the scoring methodology used, and so the results are not comparable between the surveys.

The results section for the survey is attached. (Appendix 1).

#### 2. Methodology

1535 patients who had a diagnosis of cancer and had received care or treatment from UHB during the period January – March 2010, were invited to take part in the survey. Postal questionnaires were sent, followed by two reminder letters. A response rate of 59% (n719) was achieved, which was below the 67% (67,713) national average.

Responses have been summarised as the percentage of patients who reported a positive experience. Neutral responses were not included in the denominator. The higher the score, the better the Trust's performance.

If less than 20 patients responded to an individual question, the score was not included in the final report.

The graphs included in the report display the scores for UHB, compared with national benchmarks. Each bar represents the range of results for each question across all trusts that took part in the survey. In the graphs, the bar is divided into three sections:

- The red section (to the left) shows the scores for the 20% of trusts with the lowest scores.
- The green section (to the right) shows the scores for the 20% of trusts with the highest scores.
- The amber section (middle section) represents the range of scores for the remaining 60% of trusts.
- A black circle represents the score for UHB. If the circle is in the amber section of the bar for example, it means that the Trust is among the middle 60% of trusts in England for that question. The line on either side of the circle shows the 95% confidence interval, i.e. the amount of uncertainty surrounding the score)

### 3. Comparison Results and Key Findings

Out of 59 questions scored for UHB, one was in the top 20% of Trusts, 11 were in the bottom 20% and 46 were in the middle 60% (Appendix 1).

The Trust achieved a score of more than 85% for the following:

- First appointment no more than four weeks after referral
- Patient given the name of the Clinical Nurse Specialist (CNS) in charge of their care
- CNS definitely listened carefully the last time spoken to
- CNS gave understandable answers to important questions
- Last time seen, time spent with CNS about right
- Admission date not changed by hospital
- Patient thought doctors knew enough about how to treat their cancer
- Always given enough privacy when being examined or treated
- Given clear written information about what should / should not do post discharge
- Staff told patient who to contact if worried post discharge
- Staff did everything to control side effects of chemotherapy
- Patient felt that the doctor spent the right amount of time with them
- Doctor had right notes and documentation with them
- GP given enough information about patient's condition and treatment
- Patient given the right amount of information about condition and treatment.

The following areas scored less than 60% and require urgent action:

- Hospital staff gave information on financial help
- Patient given enough care from health or social services (home support)
- Waited no longer than 30 minutes for OPD appointment to start
- Hospital and community staff work well together

Further areas which scored between 60 and 70 also require consideration for action:

- Patient told they could bring a friend when first told they had cancer
- Patient completely understood the explanation of what was wrong
- Patient given written information about the type of cancer they had
- Patient involved in decisions about which treatment
- Hospital staff told patient they could get free prescriptions
- Patient given written information about the operation
- Staff explained how the operation had gone in an understandable way
- Patients family definitely had opportunity to talk to the doctor
- Patient had confidence and trust in all ward nurses
- Always / nearly enough nurses on duty
- Family definitely given all the information needed to help care at home
- Hospital staff gave patient enough emotional support

In the wider report a comparison of the results is also provided for each tumour group included in the survey, which for UHB are:

- Breast
- Colorectal
- Prostate
- Brain
- Haematological
- Head and Neck
- Skin
- Upper Gastro
- Urological

Scores for each tumour group have been compared to the national response score. The following top 3 performing tumour groups have achieved above the national average for a significant number of questions, shown in brackets:

1. Upper Gastrointestinal (43)
2. Skin (39)
3. Brain (32)

The following bottom 3 performing tumour groups have achieved a lower score than the national average for a significant number of questions, as shown in brackets:

1. Breast (52)
2. Haematological (39)
3. Head and Neck (38)

#### 4. **Next steps - using the scores to improve the experience for patients**

These results will be considered alongside the results of the local Pan Birmingham Cancer Network patient experience survey and the recently published Improving Outcomes: A Strategy for Cancer (DH 2011). An action plan for improvement will be developed in conjunction with the Lead Nurse / Lead Clinician for Cancer Services.

Monitoring of progress will be via the Care Quality Group, chaired by the Executive Chief Nurse. A progress report will be submitted to the group on a bi-monthly basis.

A six monthly progress report will be presented to the Board of Directors.

#### 5. **Recommendations**

The Board of Directors is asked to:

- 5.1 **Note** the results of the 2010 National Cancer Patient Experience Survey report which provides a comparison with the results from all NHS Trusts.
- 5.2 **Note** the contents of this report and the key findings of the survey.
- 5.3 **Agree** to receive updates via the Chief Nurse's Care Quality report

Kay Fawcett  
Executive Chief Nurse  
18 January 2011