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Benchmarks charts

The benchmark charts compare (for selected questions only) the four Scottish Boards’ inpatient survey results and the 2004 English inpatient survey results using a scored scale.

Interpreting the report

For each question in the survey, the individual responses were scored on a scale of 0 to 100, depending on the extent to which the patient’s experience could have been better. A score of 100 represents the best possible response. The average scores for each board/trust for each question were calculated.

Each bar represents the range of results across all English trusts surveyed by Picker Institute Europe in the 2004 English inpatient survey for one question. The bar is divided into three coloured segments:

- The left-hand end of the bar (coloured red) shows the scores for the 20% of English trusts with the lowest scores
- The right-hand end of the bar (coloured green) shows the scores for the 20% of English trusts with the highest scores
- The middle section of the bar (coloured orange) represents the range of scores for the remaining 60% of trusts

The score for each Board is shown on each bar by a filled coloured circle. So, for example, if a Board is in the green section of the bar, it compares with the best 20% of trusts in England. The line either side of the diamond shows the amount of uncertainty surrounding the Board value, as a result of random fluctuation\(^1\). Where no comparison is made with English results, it is because this question was not asked of all Trusts in the English inpatient survey.

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\(^1\) This is the 95% confidence interval indicating that in 95% of cases we can expect the true value to be within this range. Where fewer than 30 people answered a question at this trust, the diamond is not shown because the uncertainty around the result would be too great.
A3. While you were in A&E, did you get enough information about your medical condition and treatment?

A6. When you were told you would be going into hospital were you given enough notice of the date of your admission?

A10. Before being admitted to hospital, were you given any printed information about the hospital?

A11. Before being admitted to hospital, were you given any printed information about your treatment or condition?

B1. When you reached the ward did you get enough information about ward routines?

C1. When you had important questions to ask a doctor, did you get answers that you could understand?

D1. When you had important questions to ask a nurse, did you get answers that you could understand?

D2. If you had worries or fears about your condition or treatment, did a nurse discuss them with you?

D5. While you were in hospital, did nurses give you any information in a way which upset you?

D7. If you ever needed to talk to a nurse, did you get the opportunity to do so?

D9. Did you ever think that nurses were deliberately not telling you certain things that you wanted to know?

D10. In your opinion, did the nurses who treated you know enough about your condition or treatment?

E1. Did members of staff say different things?
E3. How much information about your condition or treatment was given to you?

E4. If your family or someone else close to you wanted to talk to a doctor, did they have enough opportunity to do so?

E5. How much information about your condition or treatment was given to your family or someone close to you?

E6. Did you find someone on the hospital staff to talk to about your worries and fears?

E7. Were you given enough privacy when discussing your condition or treatment?

F5. How many minutes after you requested pain medicine did it usually take before you got it?

F7. Did you think the hospital staff did everything they could to help control your pain?

F8. Overall, how much pain medicine did you get?

G4. Did the doctors and nurses spend enough time telling you about what would happen during your recovery at home?

G5. Were you given any written or printed information about what you should or should not do during your recovery after leaving hospital?

G6. Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?

G7. Did a member of staff tell you about medication side effects to watch for when you went home?

G8. Did a member of staff tell you about any danger signals you should watch for after you went home?

G9. Did the doctors or nurses give your family or someone close to you all the information they needed to help you recover?

G10. Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?

Percentage score

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%
Summary of benchmark reports

The results for the four Scottish Boards lie within the middle 60% or top 20% of English Trusts for nearly all questions. Site 4 and site 2 more often appear in the top 20% and this provides the opportunity to understand their practices and share these to improve patients’ experiences across Scotland.

Patients’ experience of pain management

Results for the three questions asked of patients who said they were in pain in hospital show that:

- Site 2 provides the best response to patient requests for pain medicine (question F5) and is indeed at the top performing level of all English trusts. The results for the other Boards are within the top 20% of all English trusts when confidence intervals are considered.

- Again site 2 has the highest result for patients responding that staff did everything they could to help control pain (question F6). The site 4 result is also within the top 20% of English trusts.

- In terms of patients receiving the right amount of pain medicine (question F7), the results for site 3 are below the others and also close to the worst 20% of English trusts. The percentage differences are small here; all the results lie between 84% and 98%.

We did not attempt in this pilot project to suggest what the desirable rates or outcome for any indicator should be. If the project continues, the possibility of doing so on a case-by-case basis for each indicator selected will have to be investigated. It may be possible to set absolute limits that we want to reach for some indicators. For others, we may wish to ensure that all sites are performing or working towards the level of the best in Scotland and we may also wish to compare ourselves to the best available internationally. For example, we can compare results from our sites to those from English trusts for most of the questions asked through Picker. However, even when ‘our’ results are good by comparison, we cannot automatically accept that they are good enough.

Importantly, the Picker and HPS data provides a clear baseline for the Boards involved to measure improvement and against which all other Scottish Boards could benchmark their own performance. The aim is to get the measurement of pressure ulcer and nutrition-related data to a stage where similar comparisons can be made.