

## **St Magnus Patient Satisfaction Survey** **2016/17**

This patient satisfaction survey was carried out in December 2016 and January 2017, with patients on the three low secure wards, Oak, Sycamore and Willow and on three locked recovery wards, Cowdray, Petworth and Park House Unit, being given questionnaires to complete anonymously. For the 6 patients on Cowdray ward at the time the questionnaire was distributed, 5 lacked the capacity to respond to the survey questions and one patient refused. Therefore responses have been organised into three groups, the Low Secure Unit, Petworth ward representing the St Magnus building locked recovery wards and Park House unit, including Goodwood ward. This was considered to most accurately reflect the three different environments that patients inhabit in St Magnus Hospital.

The questions used are taken from the ***National Audit of Violence – Standards for Inpatient Mental Health Services*** by the CCQI (College Centre for Quality Improvement), Royal College of Psychiatrists and the Healthcare Commission (March 2007) as these assess a wide range of factors in ward life that could lead to patient dissatisfaction and even violence. Due to evident confusion by patients in previous years caused by how questions were sometimes worded the questionnaire was further simplified, following on from some simplification of the questionnaire in 2015, to aid patient comprehension. Also a number of duplicate questions were removed to reduce the size of the questionnaire and make it less onerous for patients to complete.

Due to the high levels of cognitive impairment amongst St Magnus patients it was necessary as part of this process for staff to assess which patients would have to be excluded due to their inability to understand and answer the questions.

The answers have been categorised into as simple a range of responses as possible in order to facilitate statistical analysis. However each question was asked as a simple question with a free text response so the nature and content of the responses varied widely. In most, but not all cases, it was possible to organise these into Yes or No answers. In a number of cases the answer has been reported as “unclear” because it has not been possible to determine what the patient’s answer was intended to mean within the context of the question. Sometimes it appears that the patient may be expressing delusional thoughts when answering, on other occasions simply that the wording used by the patient was ambiguous and failed to convey whatever meaning they intended. It also has to be noted that many forms do not appear to be internally consistent, one answer appearing to contradict another. For example several patients stated that they have never been restrained yet elsewhere provided details of being restrained. All patient answers have been recorded as given, even where they appear inconsistent with other answers. It has not been possible to cross reference the responses for factual accuracy so answers represent patients’ perceptions and opinions rather than necessarily actual facts about life on the ward. However for everyone life is essentially subjective, it is what we perceive it to be, so this makes the answers no less valid even if some are factually incorrect. For example patients have often recorded a topic as not applicable to them, e.g. that

the patient has never been restrained or never been placed under observation. In this context patients have answered on several occasions that they don't know the answer to a particular question.

In some areas a patient would not answer one or more questions. Sometimes this may have been simple oversight, in other cases it seems to have been a deliberate refusal to answer the question, sometimes a comment even being written by the patient to this effect.

Unlike previous years a 'Not Applicable' response has always been recorded in a context that seems contextually appropriate even if not necessarily an answer that appears totally believable. E.g. where issues about talking to staff if angry are reported as Not Applicable because the patient reports that he never gets angry.

## **RESPONSE RATE**

### **LOW SECURE UNIT**

- **Oak ward (15 patients)** – 7 completed, 7 patients refused, one questionnaire excluded because patient only answered 3 questions = 47%
- **Sycamore ward (9 patients)** – 6 completed, 2 patient refused, 1 questionnaire returned unanswered = 67%
- **Willow Ward (8 patients)** – 7 completed, 1 patient refused = 88%

**Total Response Rate 20/32 = 63%**

### **LOCKED RECOVERY SERVICE**

- **Park House, including Goodwood ward (30 patients)** – 13 completed, 16 marked that patient unable to respond due to mental state, 1 form excluded as patient only answered 3 questions = 43%

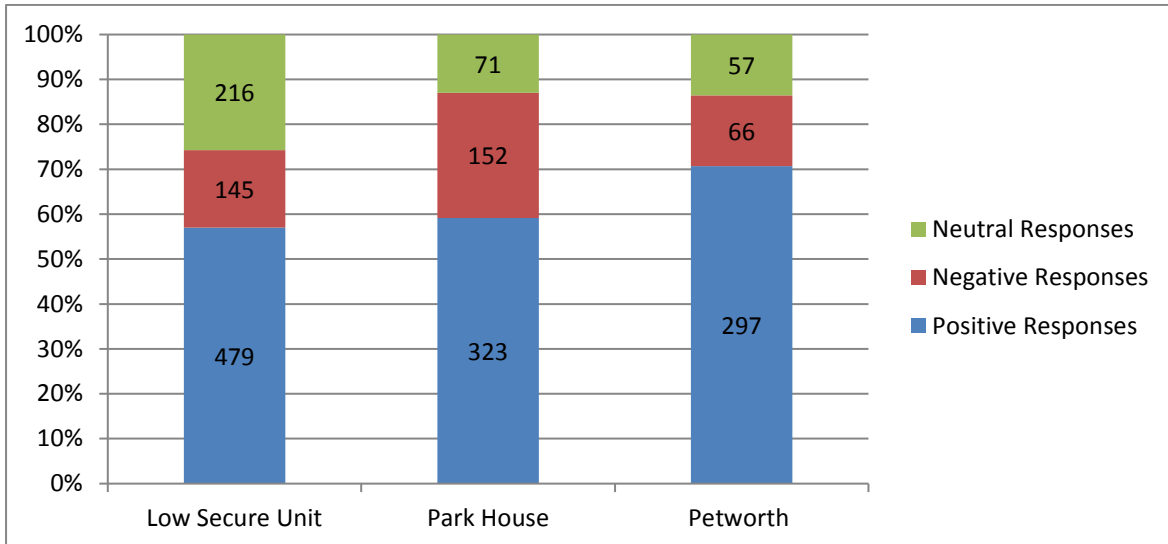
### **St Magnus LRS**

- **Cowdray ward (6 patients)** – No survey forms returned = 0%
- **Petworth ward (15 patients)** – 10 completed, 5 patients refused to do survey = 67%

This is a drop from the return rates for the previous 2015 survey and represents a reasonable but not ideal response rate for the hospital given the mental state of its patient population.

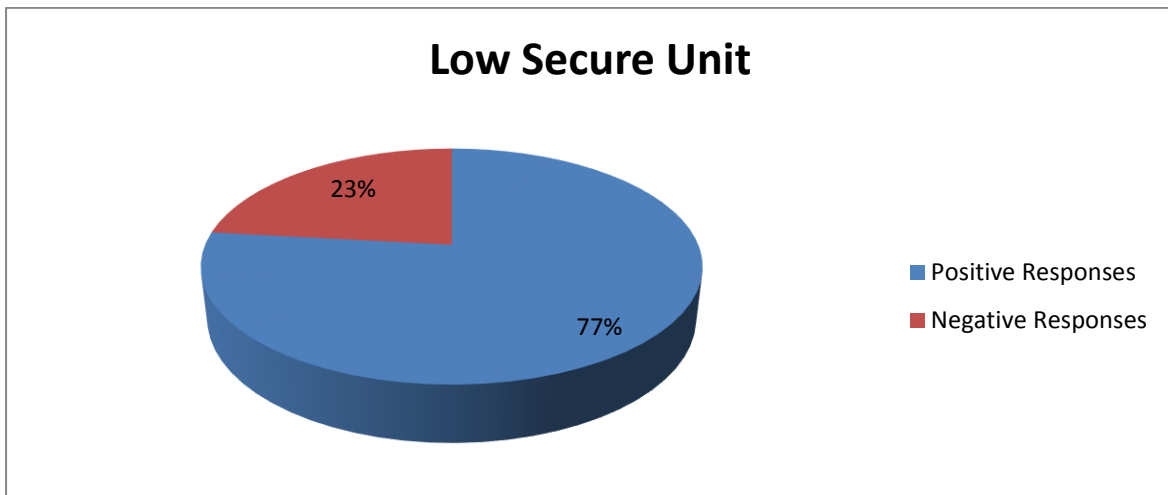
## **Summary**

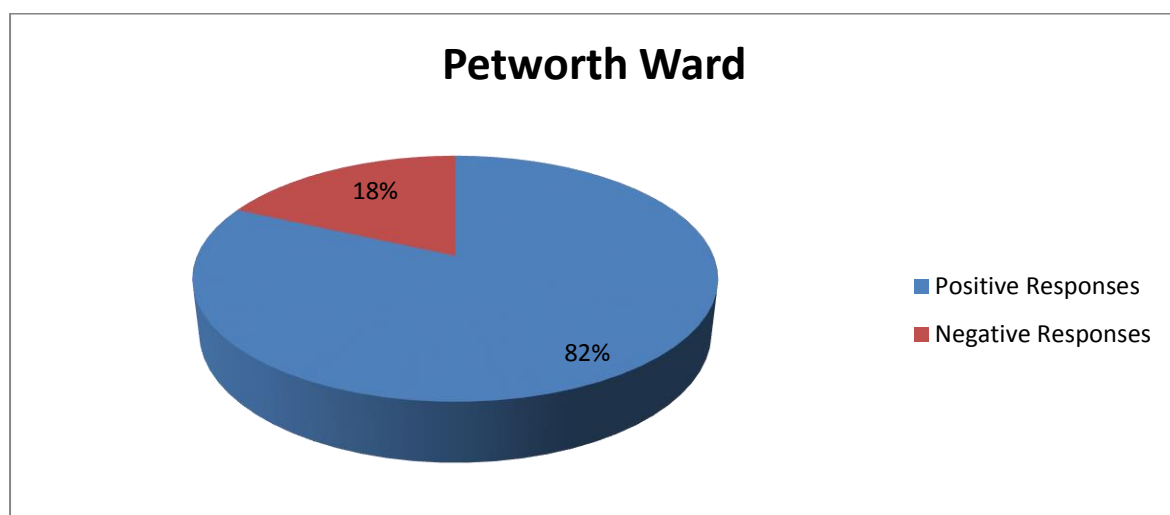
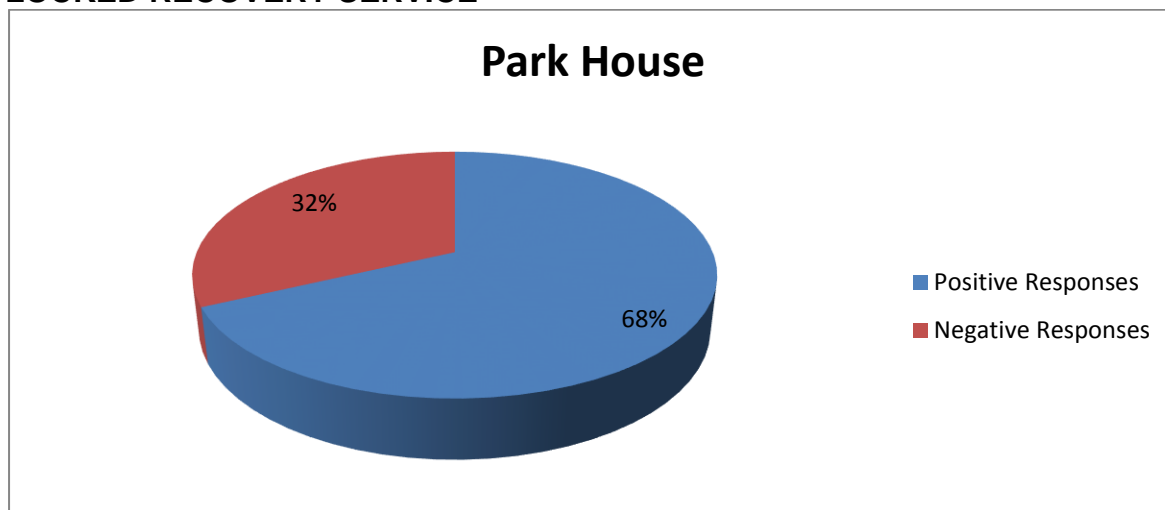
An overall review of positive and negative responses for the Low Secure Unit, Petworth ward and Park House provides the following numbers.



Neutral responses were those where the question was not answered, answered in a way that could not be understood, identified as not applicable, given a 'partial' or 'to some degree' style answer or with an equivocal answer that could be both positive and negative or neither. Neutral responses accounted for 26% of all Low Secure responses (2015 = 22%), 13% of Park House responses (2015 = 28%) and 16% of Petworth ward LRS responses (2015 = 31%). Only in the LSU have neutral responses increased, slightly. In both Park House and Petworth ward they have dropped significantly so that patient responses are much more polarised into positive and negative responses.

Removing neutral responses the overall Positive to Negative balance for the Low Secure Unit, Park House and Petworth ward for patient satisfaction survey responses is: -



**LOCKED RECOVERY SERVICE**

For the Low Secure Unit and Petworth ward there has been a significant improvement in the positive attitude of patients towards the service since the previous 2015 survey. Park House has shown a small drop in positive responses.

<b>POSITIVE RESPONSES COMPARED</b>		
	<b>2015</b>	<b>2016/17</b>
<b>Low Secure Unit</b>	62%	77% ↑
<b>Park House</b>	71%	68% ↓
<b>Petworth Ward</b>	70%	82% ↑

**Key Areas**

Areas of concern that should be reviewed and addressed by ward and unit managers are –

- Only on Petworth ward do patients see a direct relationship between activities they take part in and getting better (Q.6).

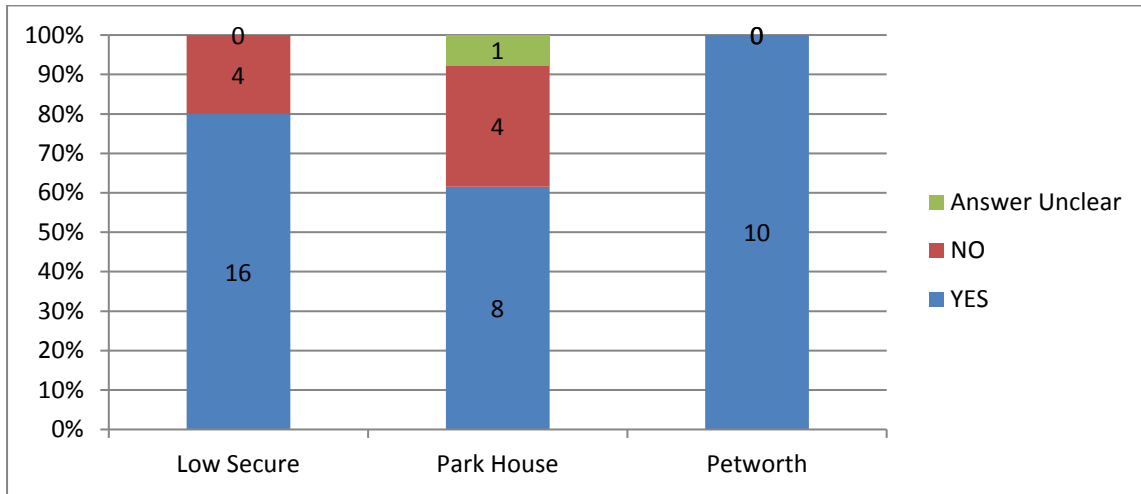
- There remain concerns around lighting, temperature, ventilation and noise on the LSU. These concerns are significantly lower on Park House and Petworth ward (Q. 9 & 10).
- Patients on LSU seem unclear about who their key worker is, in contrast to Park House and especially Petworth ward where patients seem better informed (Q.26).
- Again the LSU shows a much lower level of discussion with patients about how an incident would be managed if the patient became violent, compared to Park House and Petworth. This would place LSU practice at variance with NICE guidelines (Q.32).
- A comparatively low number of patients have seen their care plan and/or feel that it is an accurate reflection of their opinions and requests. This is a continuation of a theme identified in previous years' patient surveys and also identified in several CQC inspection reports (Q.35 & 36).
- The number of patients on the LSU who feel able to discuss their medicines with their doctor is low, in contrast with Petworth where the figure is very good (Q.37)
- On Park House 38% of patients report that they did not feel they were treated with dignity if restrained, which contrasts with more positive responses from the LSU and Petworth ward (Q.42 & 45).

### **Positive Points**

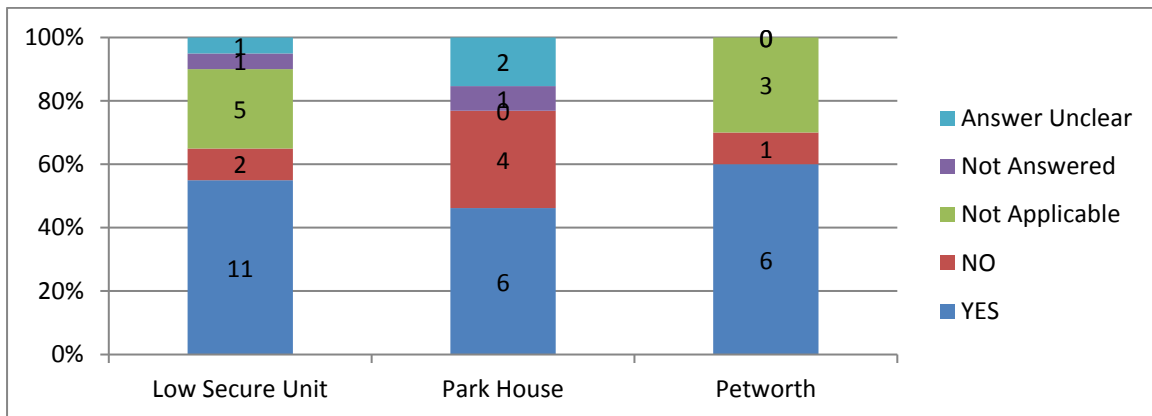
- Most patients report that they have somewhere quiet to go if they want to (Q.1).
- Most patients report that they can participate in physical activities and group activities when they want to (Q.3 & 4).
- Most patients would feel able to report an incident of staff abuse if they witnessed one (Q.16)
- Most patients feel that there are an appropriate number of staff on their ward (Q.20).
- The great majority of patients have no problems with the race or nationality of staff on their ward (Q.21).
- Most patients report that they know how to raise a formal complaint, although the number is only just over 50% for Park House (Q.33).
- Most patients feel that they are treated with dignity and respect (Q.24)
- Most patients feel able to talk to a member of staff if they feel distressed (Q.38).
- Staff talk to patients in a friendly manner (Q.41).

## Specific Question Responses

1. Is there a place where you can go to be quiet if you want to?

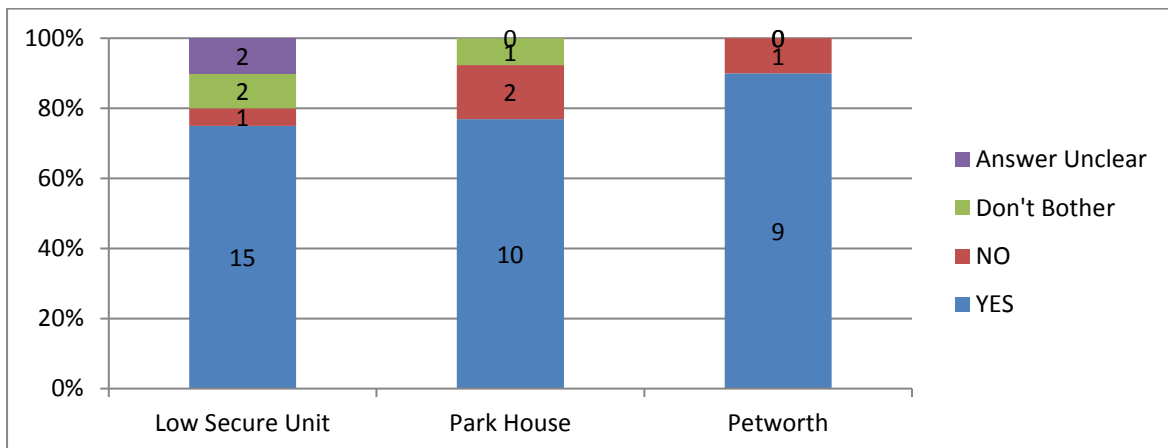


2. Would you feel free to pray there if you wanted to?

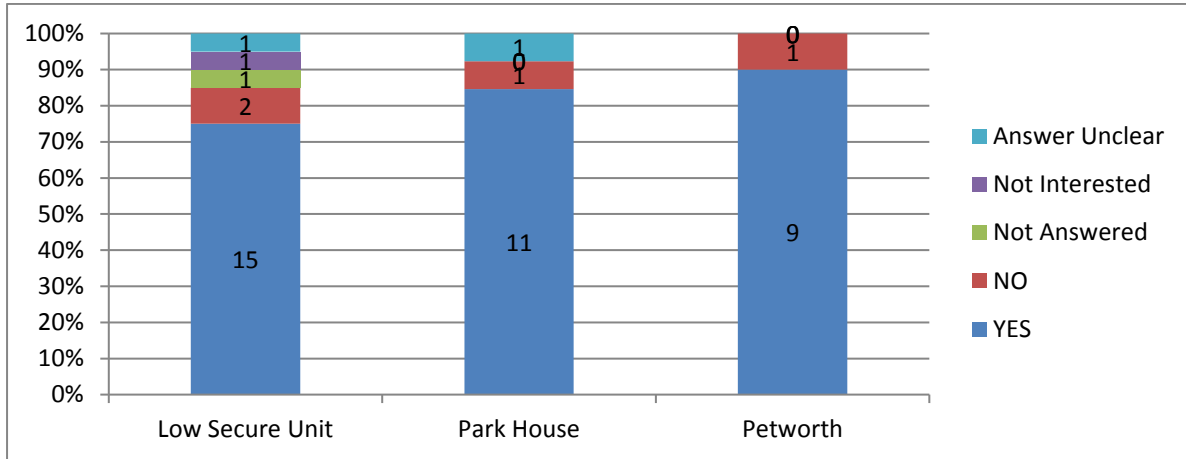


Not applicable represents statement by patient that he does not pray.

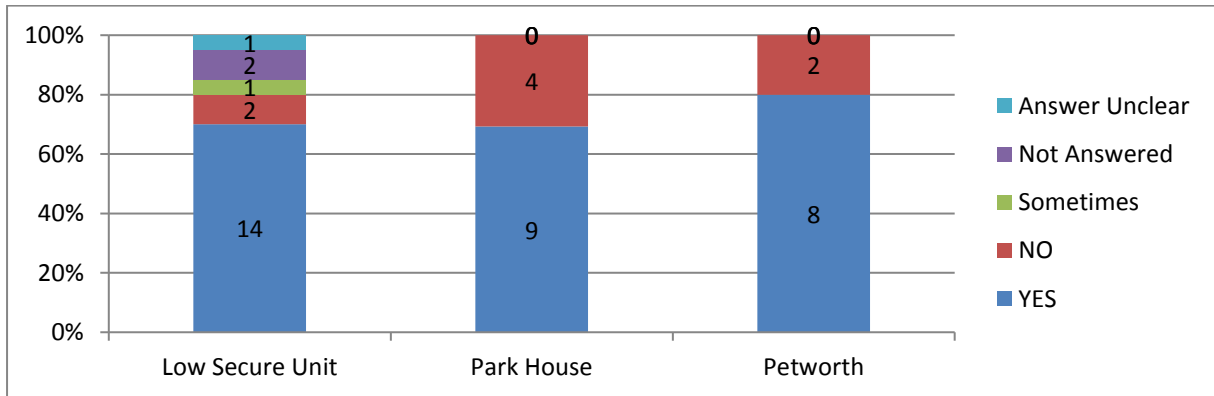
3. Do you have the opportunity to take physical exercise if you want to?



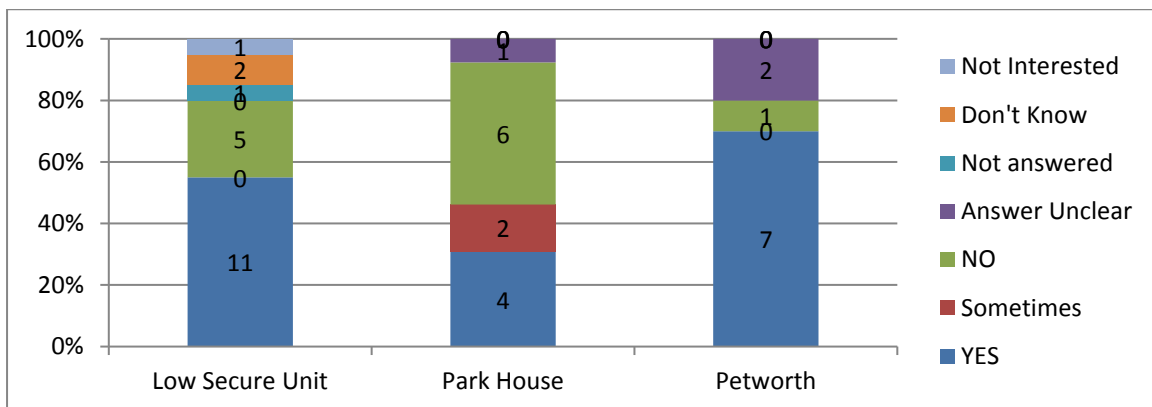
4. Do you have the opportunity to join in group activities?



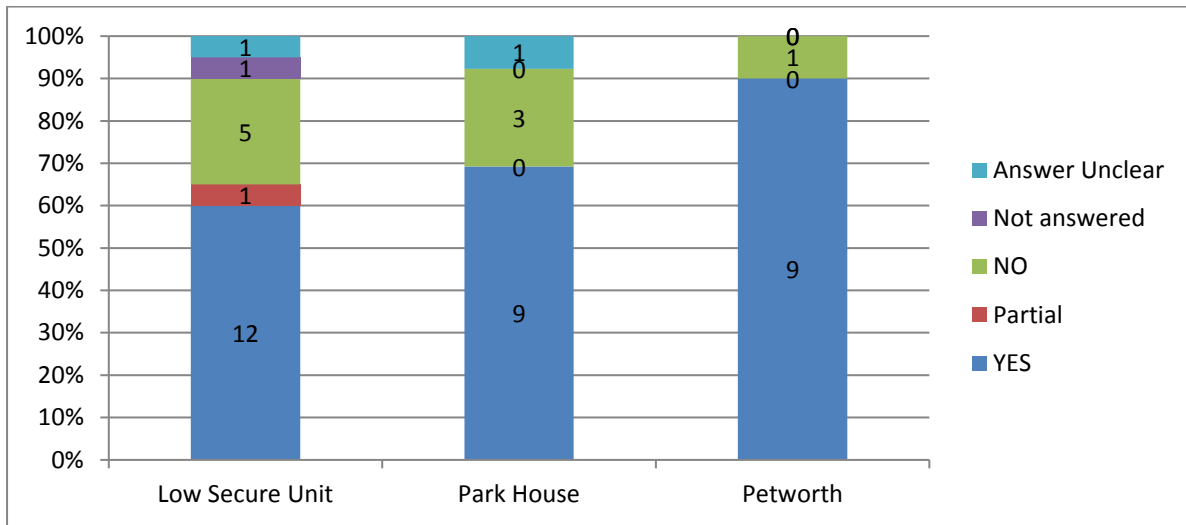
5. Are you able to take part in activities that you enjoy and are fun?



6. Are you able to take part in activities that help you get better?

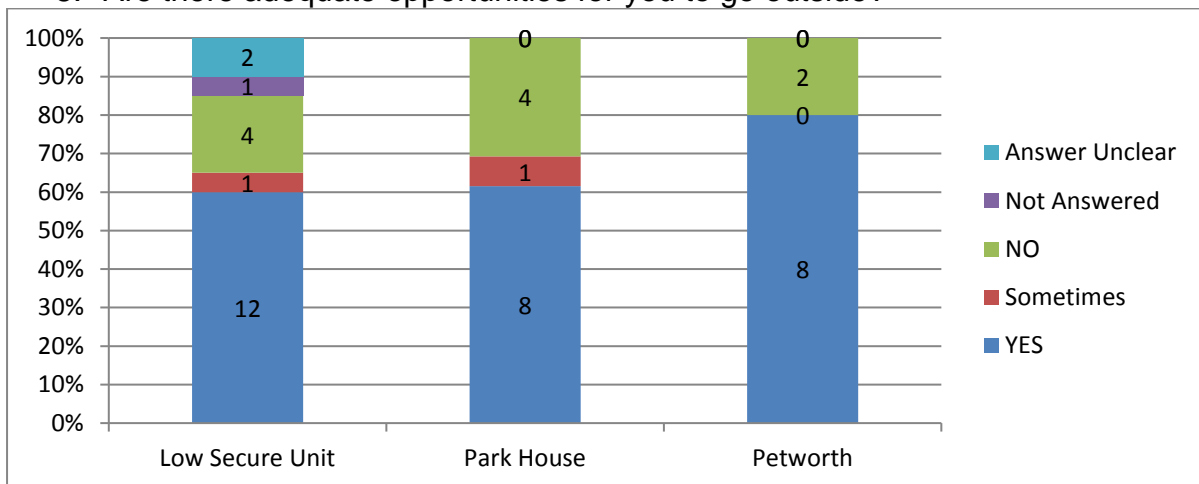


7. Is there sufficient fresh air and natural daylight on your unit?

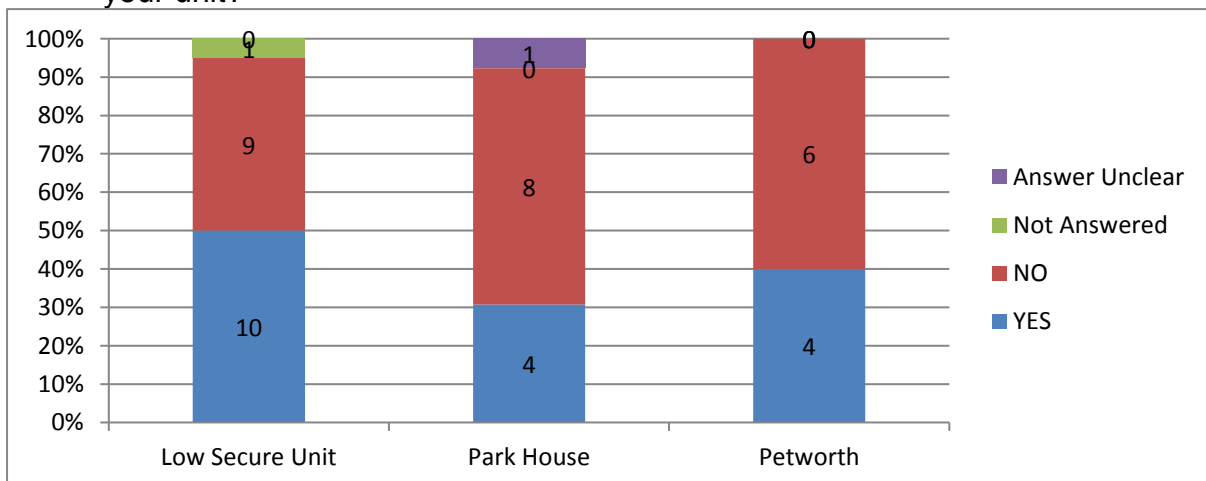


Partial = Response was "Sometimes"

8. Are there adequate opportunities for you to go outside?



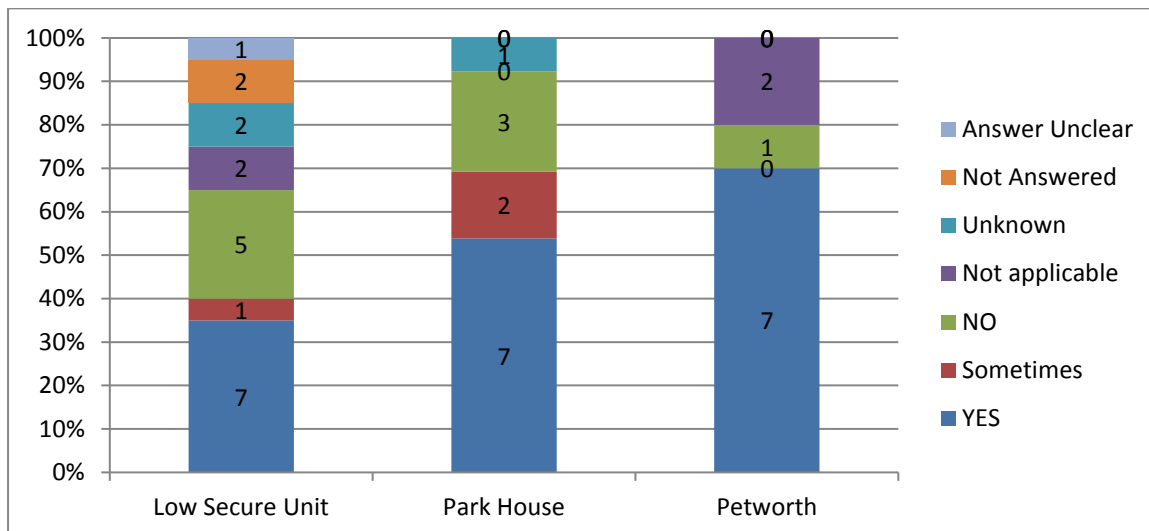
9. Are there any problems with the light, temperature, ventilation or noise on your unit?



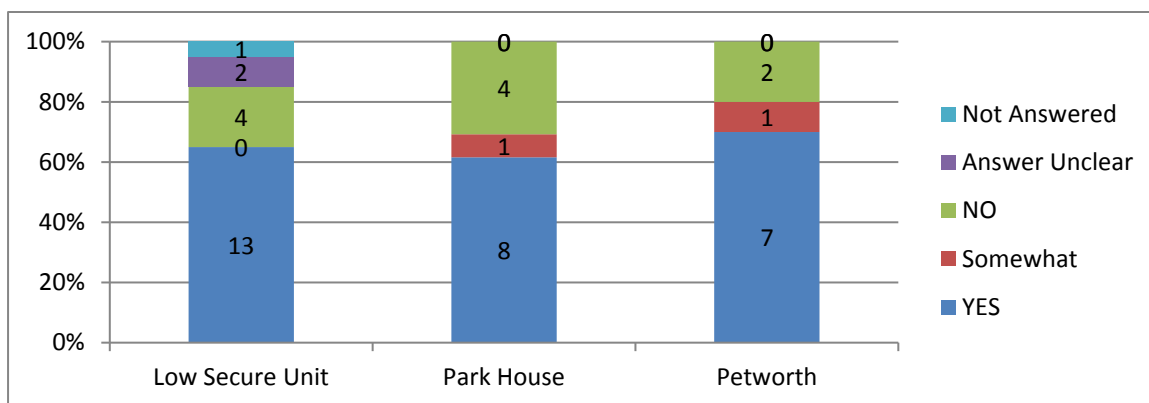
Petworth = Too much noise, too hot, the cold.



10. Are staff able to correct these problems if you ask them?



11. Do you find your unit homely and comfortable?

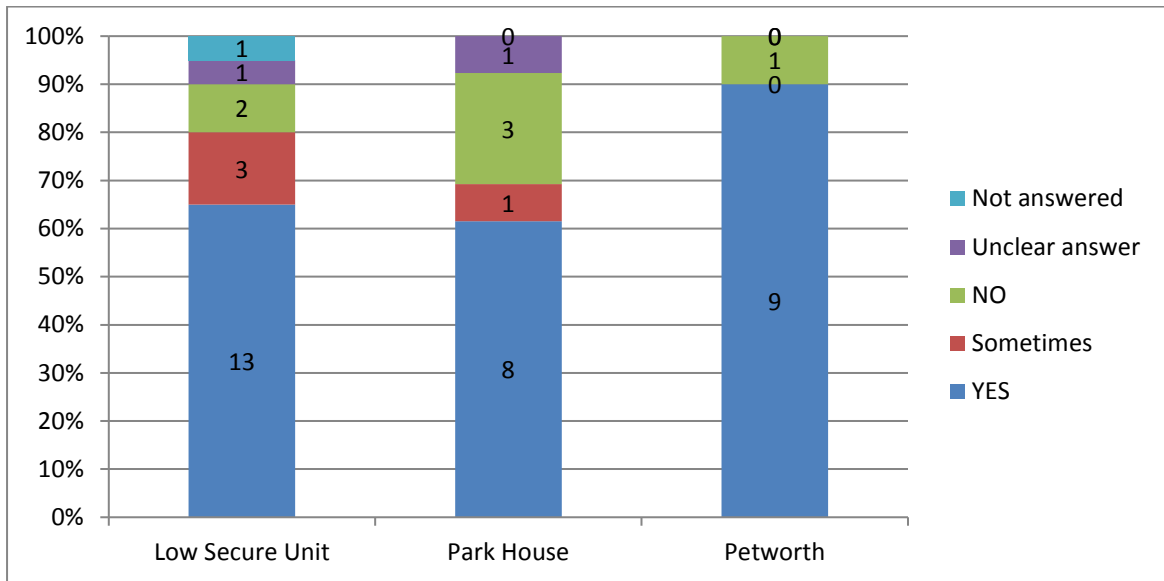


Park House – Somewhat = Comfortable Yes, Homely No.

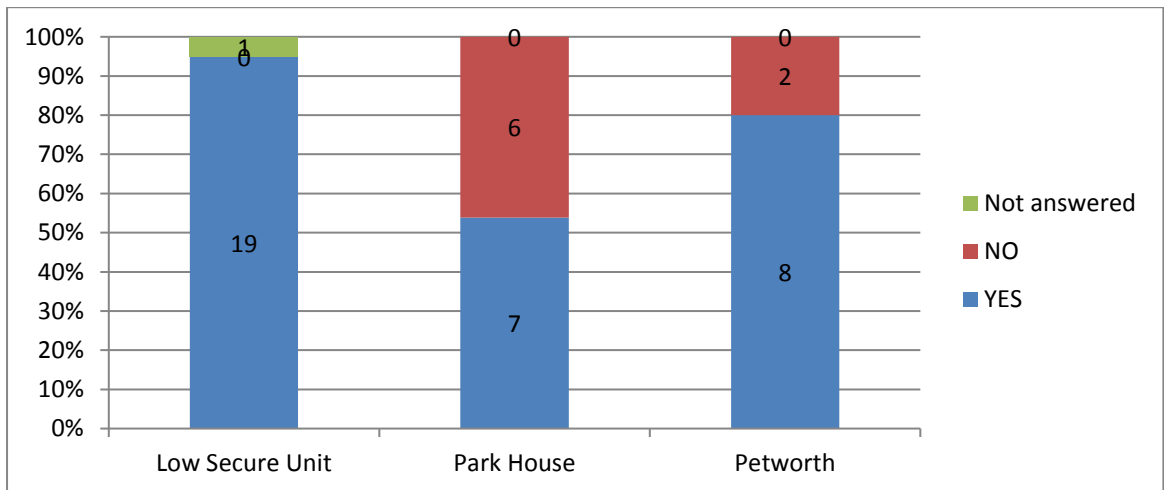
12. If the answer is no what would you change about your unit?

- a. **LSU** – Beds; Want access to explosives; More cigarette breaks; Larger rooms, no slamming doors, no key fobs; More full time staff, too many agency staff at night.
- b. **Park House** – Everything; I don't have the power; Not comfortable enough; Want to be placed closer to home.
- c. **Petworth** – Get out; More Comfortable chairs

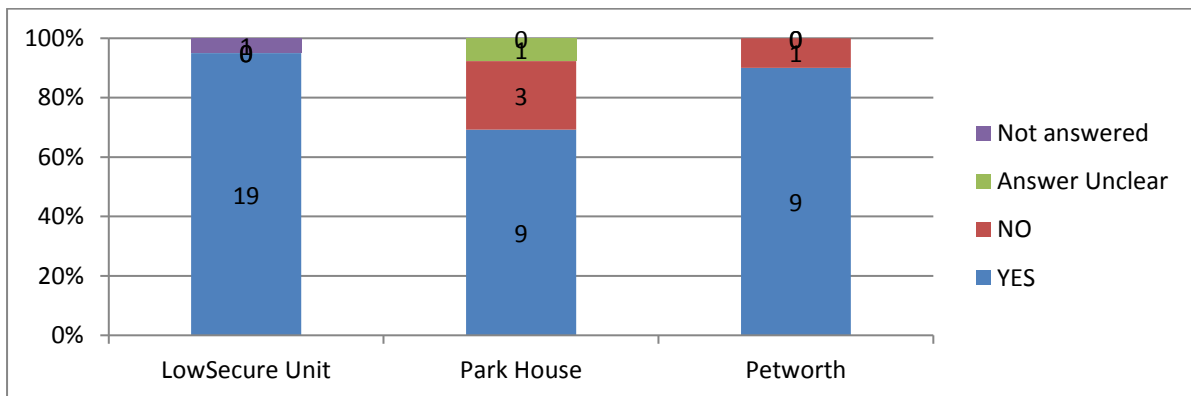
13. Are you able to choose what you would like to eat or drink?



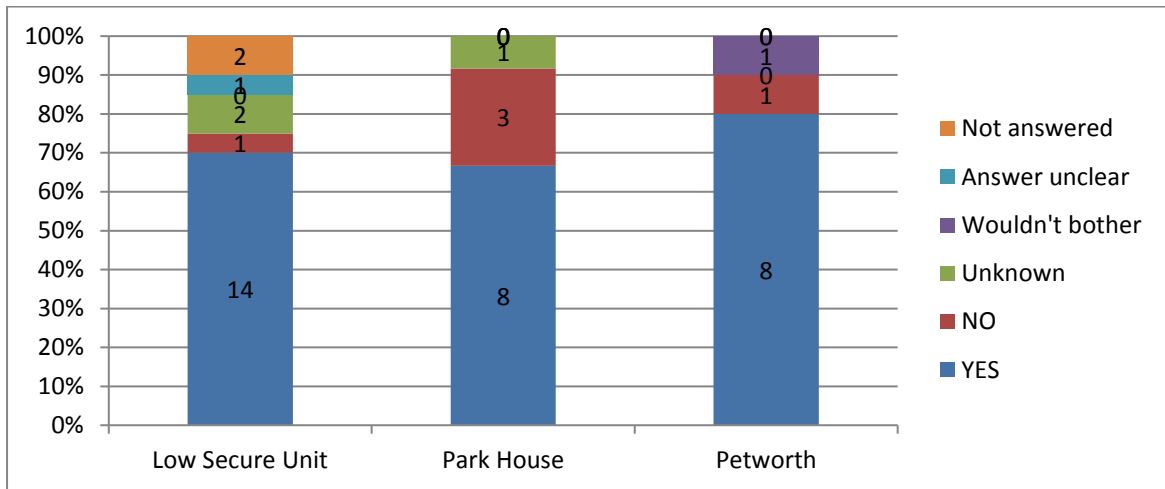
14. Can you choose when you go to bed?



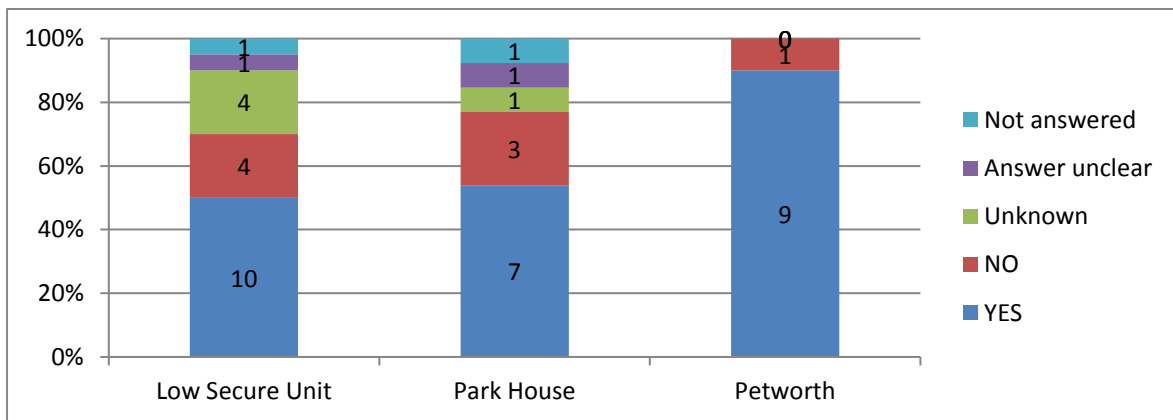
15. Can you choose what clothes you would like to wear?



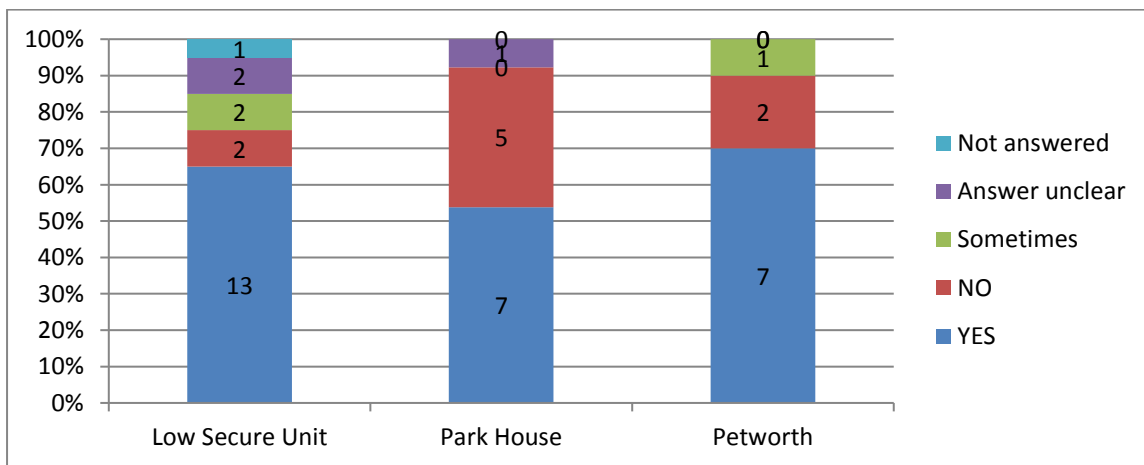
16. Would you be able to report an incident of staff abuse if you witnessed one?



17. Do you feel that staff would protect your confidentiality if you made such a report?



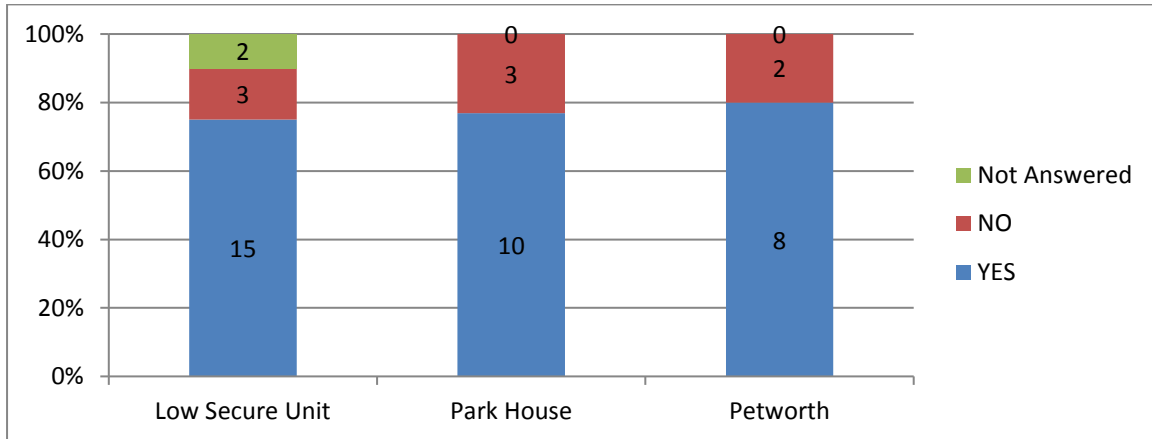
18. Do you feel safe from intimidation and violence?



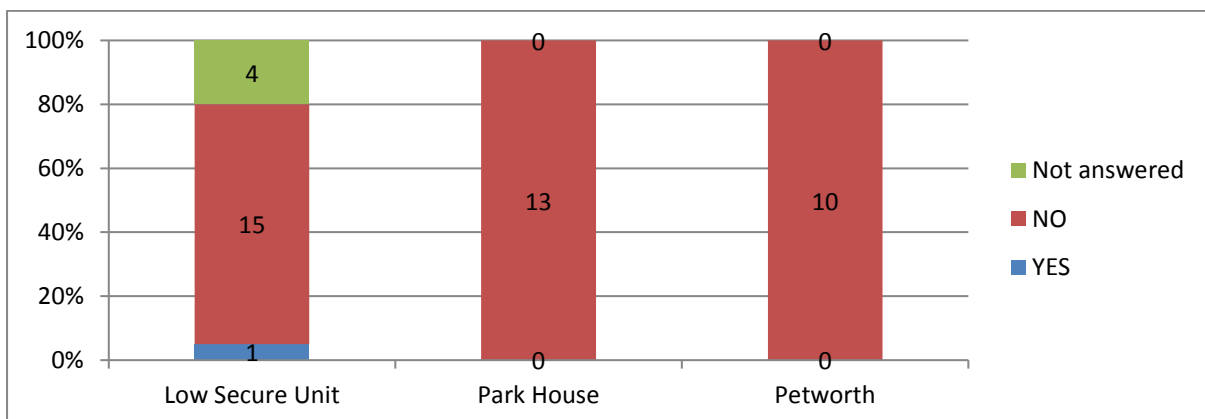
19. If not, what are your worries?

- a. LSU = None, I would retaliate; None, peaceful ward; Intimidation by staff; Wasting my life; Hurt in 2012.
- b. Park House = Staff abuse; Want to go home x2; Some patients are bullying
- c. Petworth = Other patients x2; Trust nobody

20. Are there an appropriate number of staff on your unit?



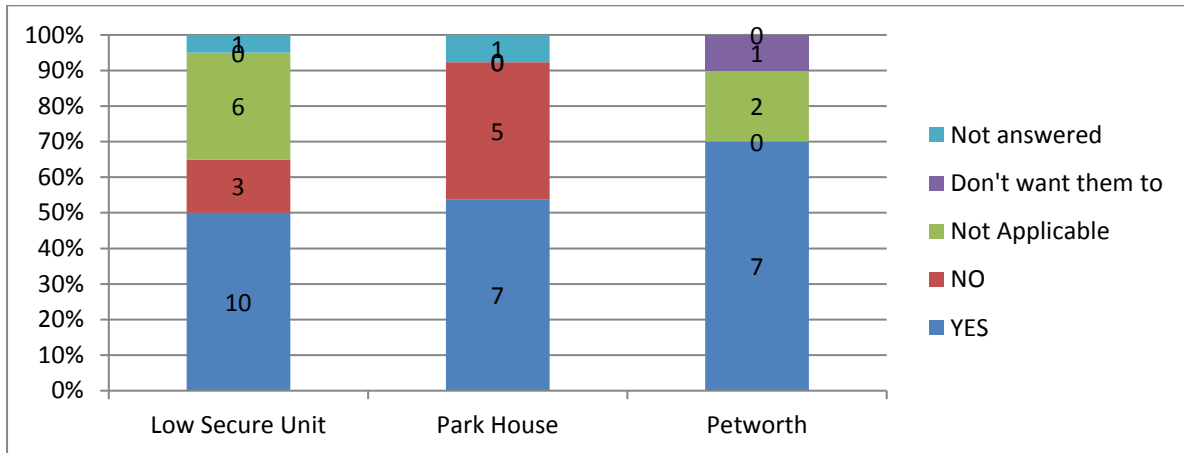
21. Do you have any problems with the race or nationality of the staff on your unit?



22. If so, please explain what these are?

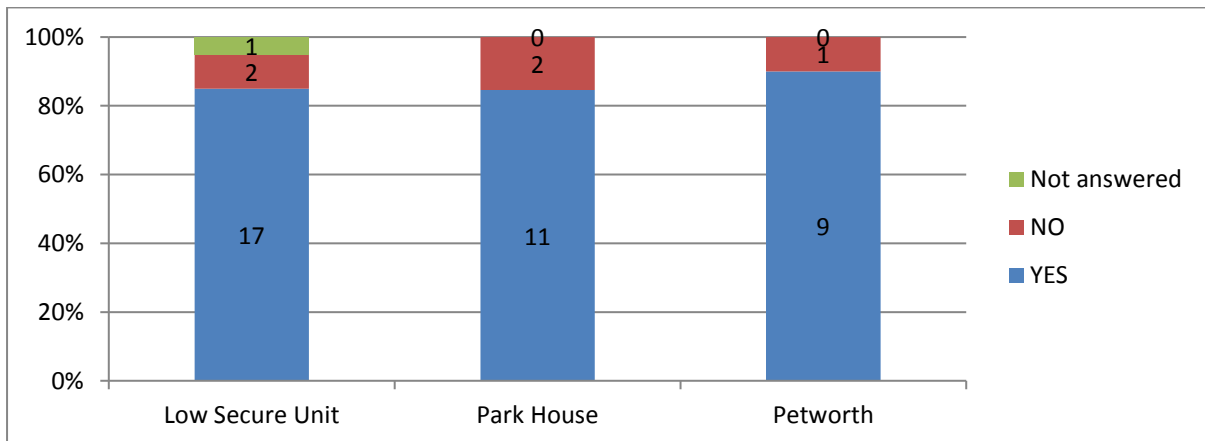
- a. LSU = Too many foreigners, disturbing where they come from; Too many agency staff

23. Are friends and family able to visit you at times and on days convenient to them?



Not applicable is used where the patient states he has no friends or family to visit.

24. Are you treated with dignity and respect?

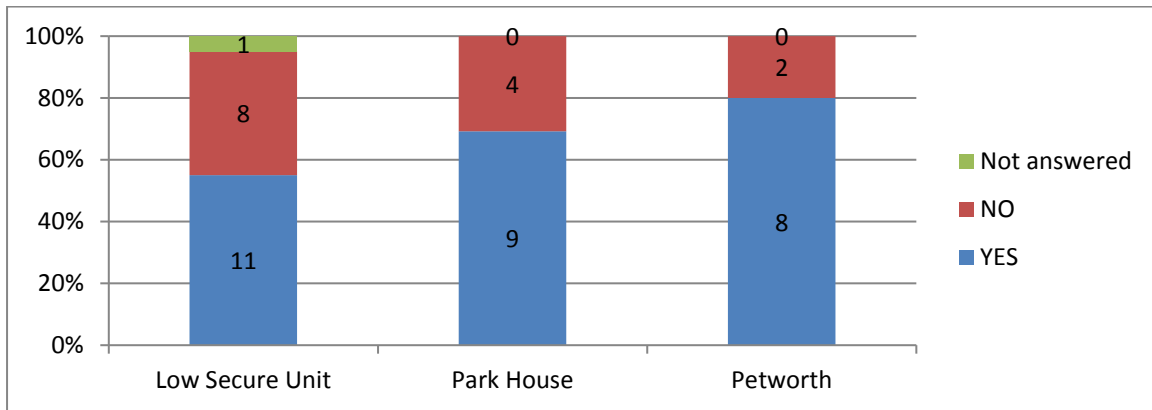


LSU 1 NO specifies this relates to night time

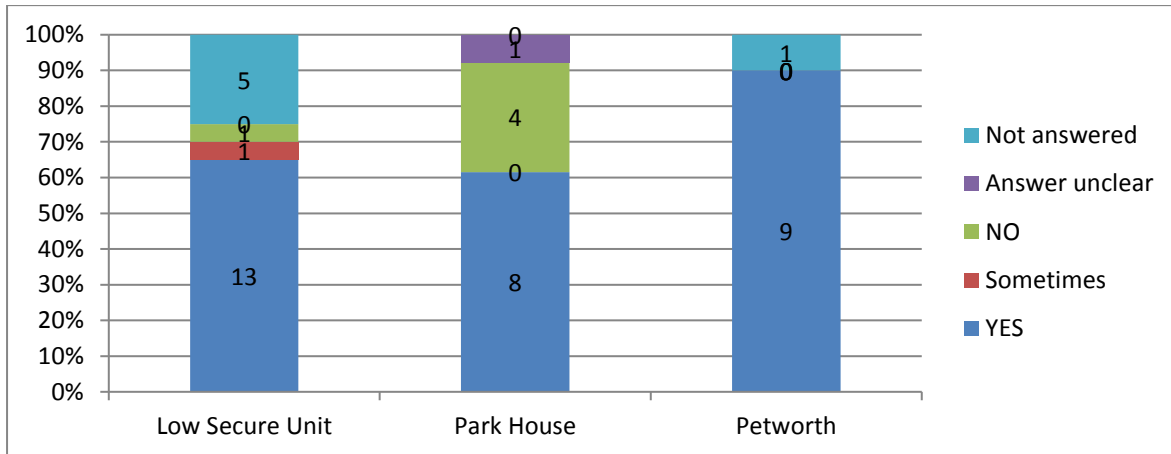
25. If not, what do you think the problem is?

- a. LSU – Some staff are arrogant and racist; agency staff
- b. Park House – Staff abuse; Don't know
- c. Petworth – No idea.

26. Have you been told who your key worker is?

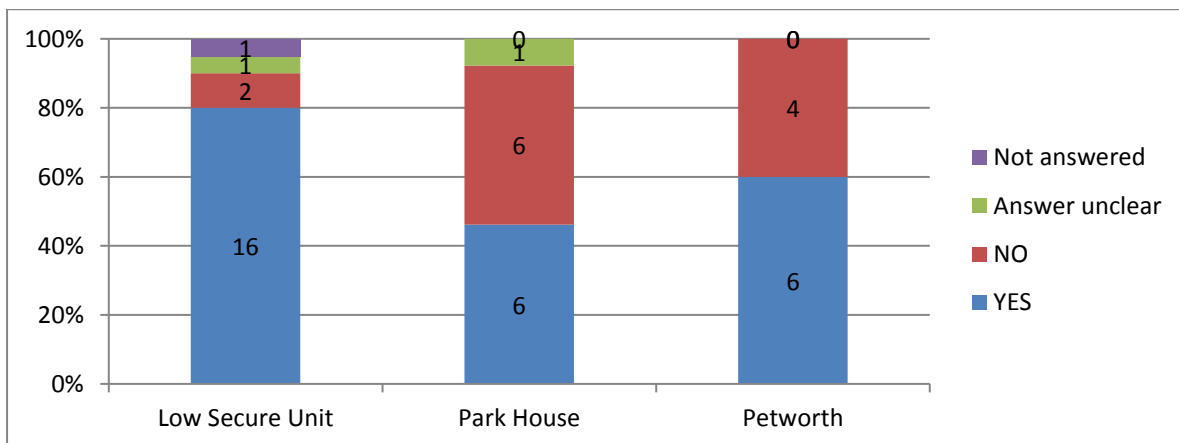


27. Are you able to talk to them when you need to?

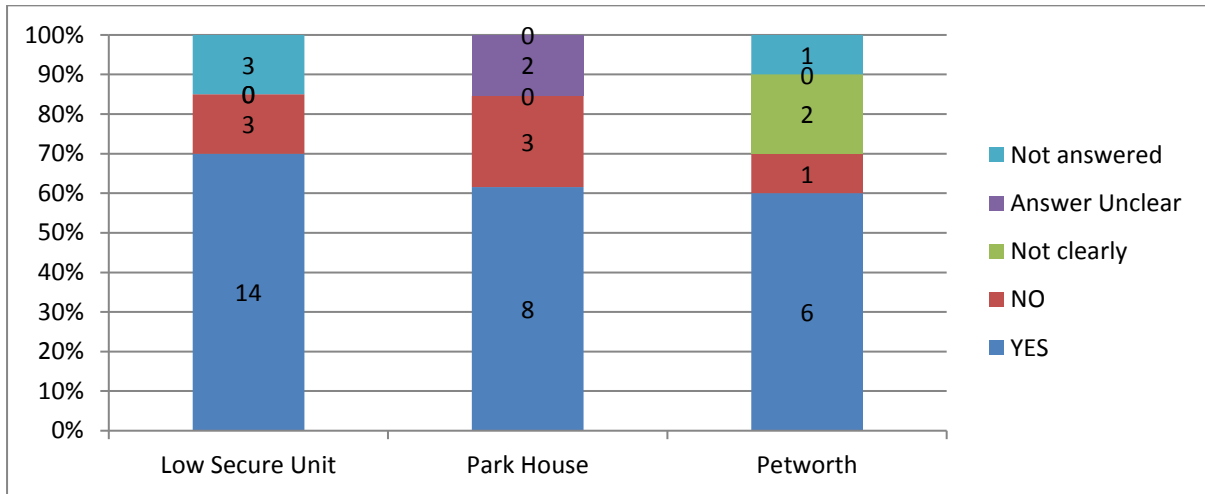


The discrepancies between this answer and the answer to question 28 above suggests patients may mean that they are able to talk to staff rather than to their keyworker.

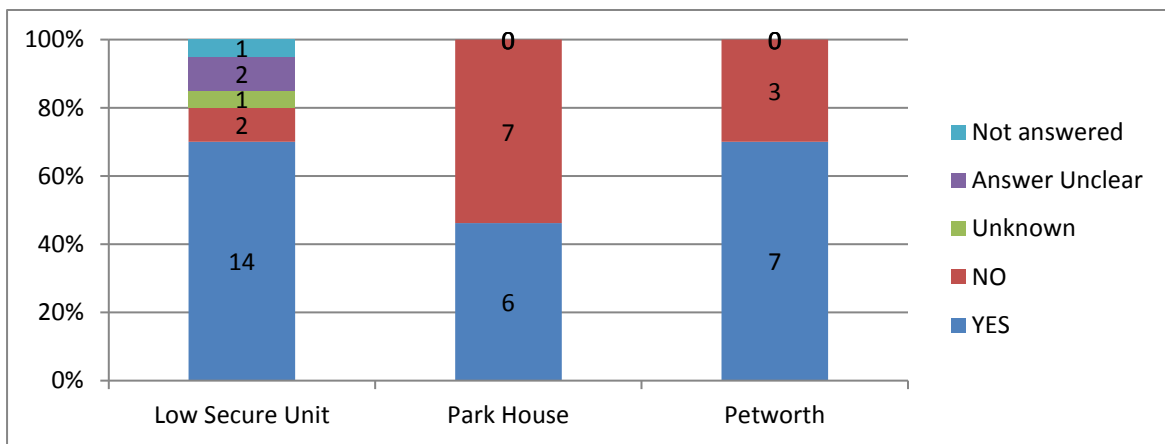
28. Have staff explained to you why you have been admitted to St Magnus?



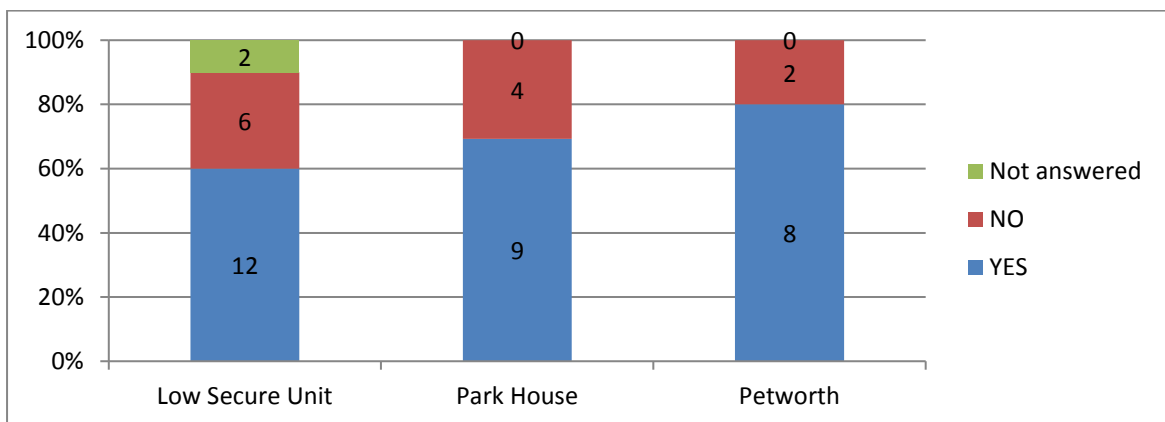
29. Have staff explained to you about the section of the Mental Health Act under which you are detained?



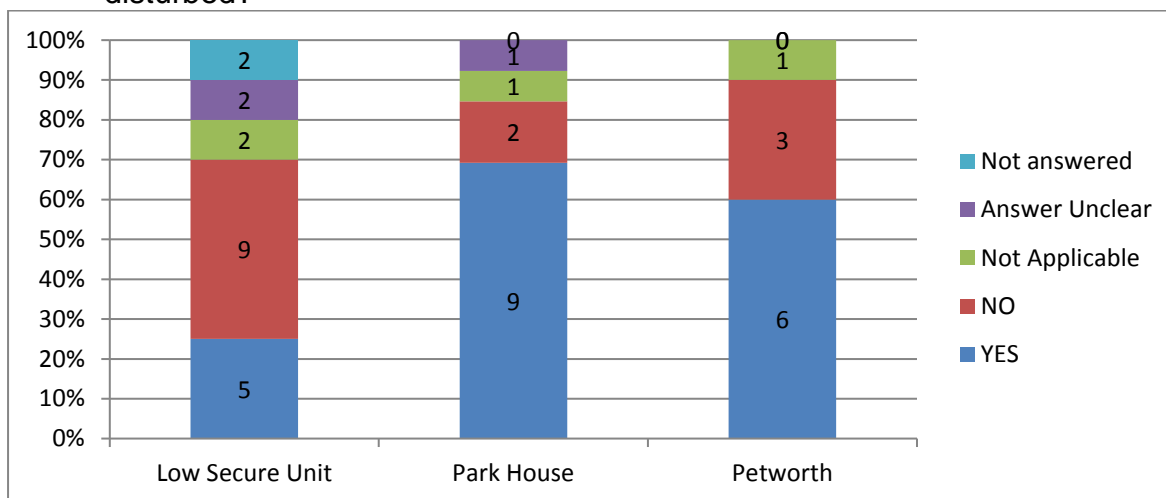
30. Did they tell you about your rights of appeal against your section?



31. Would you know how to request the help of an independent advocate?

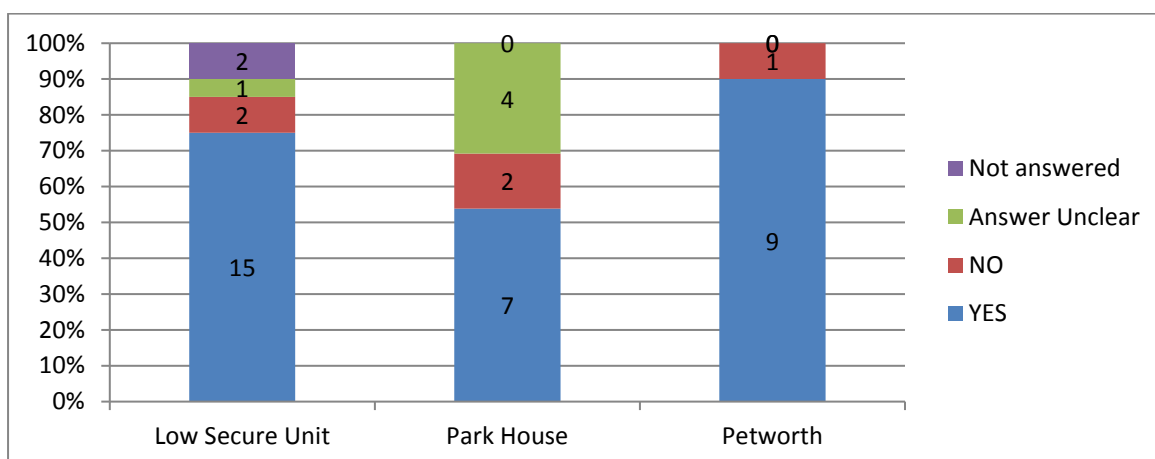


32. Have staff talked to you about what would happen if you became violent or disturbed?



**Not applicable** in this context indicates some statement by the patient that the question is not relevant because they would never be violent.

33. Do you know how to make a formal complaint?



34. Who do you have a right to make a formal complaint to?

An extremely varied range of options was put forward, even from patients who stated that did not know how to raise a formal complaint. Options listed included –

Nurse

My family

Social worker

Solicitor

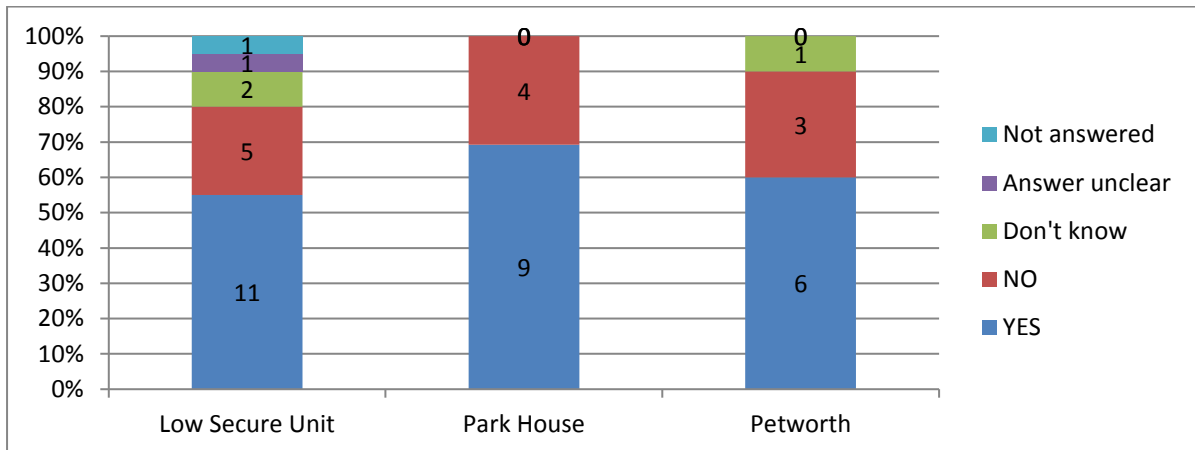
Ward manager

Senior manager

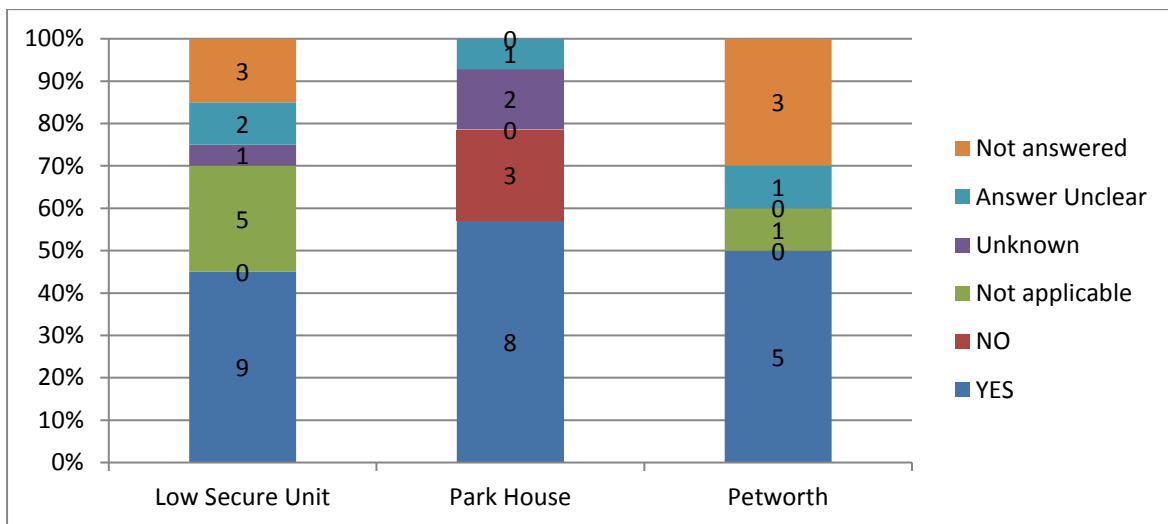
Various members of staff mentioned by name including General Manager and Operations Director



35. Have you been given a copy of your care plan?



36. Does it show correctly your opinions or requests



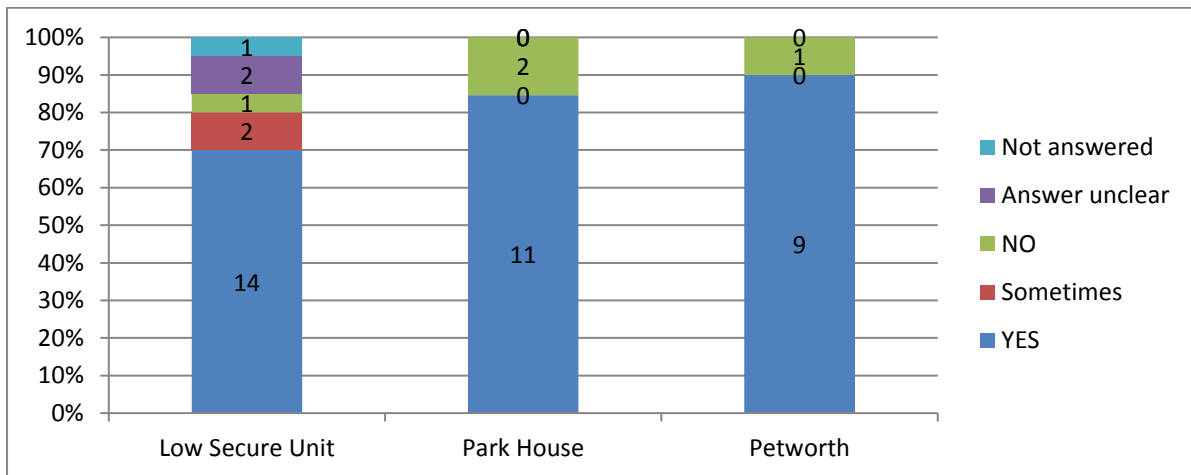
Not applicable has been given as an answer by patients saying they have not seen their care plan.

Unknown – LSU patient states this is because he can't read; Park House – 1 patient had previously stated that he had a copy of his care plan, 2<sup>nd</sup> patient that he did not.

37. Are you able to talk to your doctor about the medicines you are given?

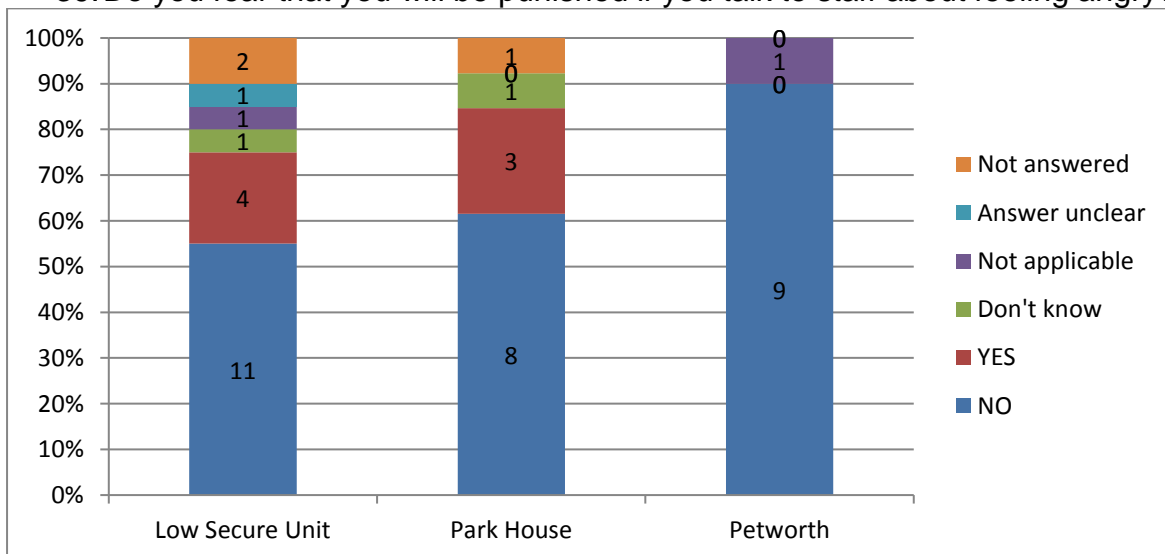


38. Are you able to talk to a member of staff when you feel distressed?



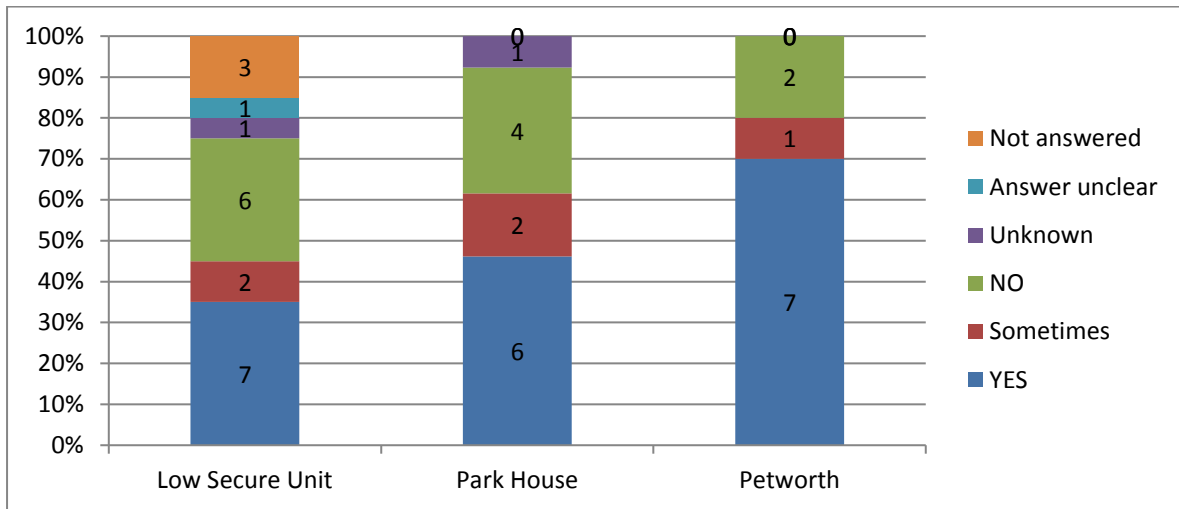
Answer unclear – 1 LSU patient answered “Lack of male nurses.”

39. Do you fear that you will be punished if you talk to staff about feeling angry?

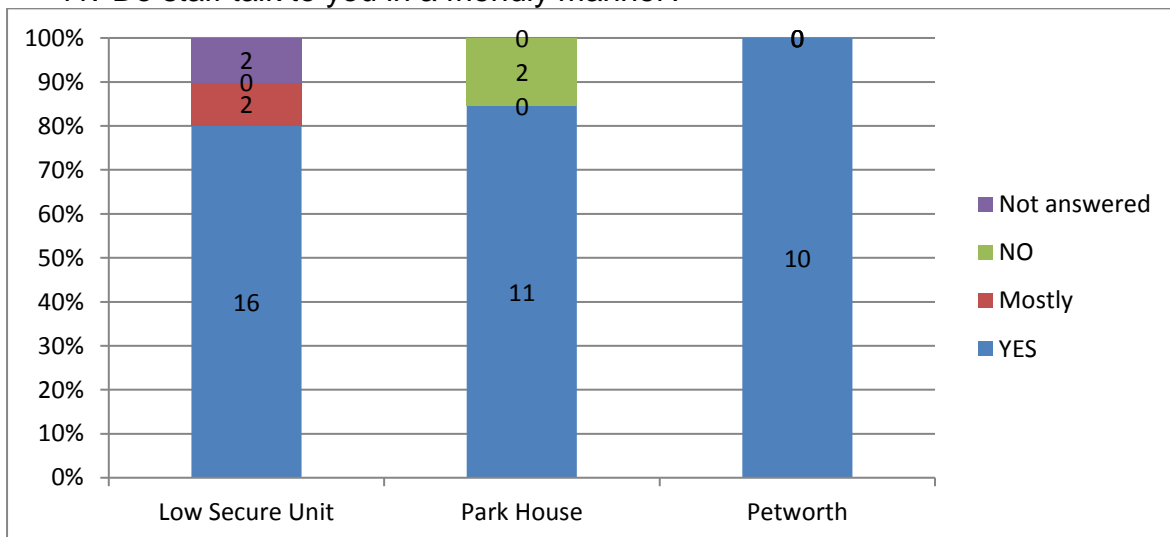


Not applicable has been given by patients who state that they are never angry.

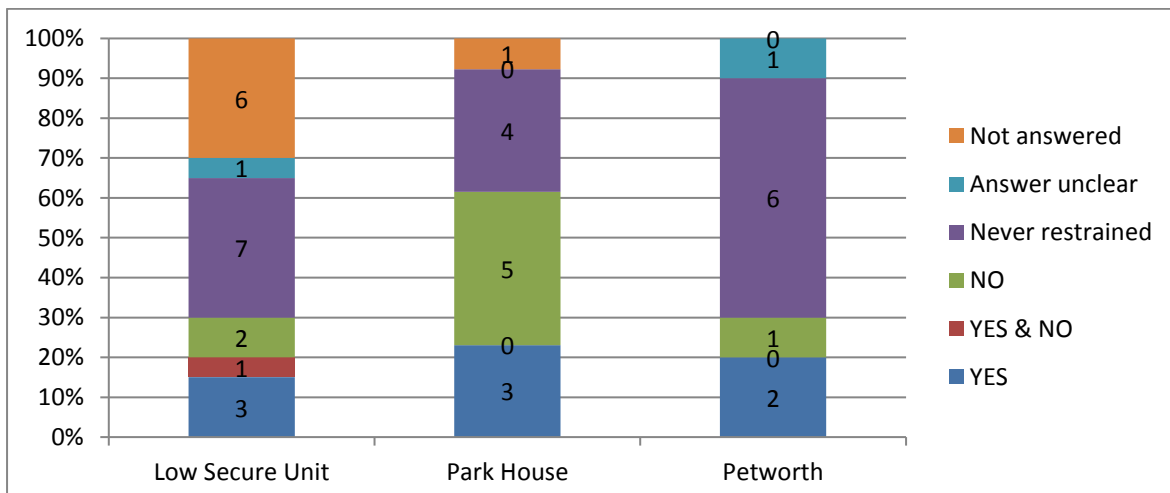
40. Can you get food outside of normal mealtimes?



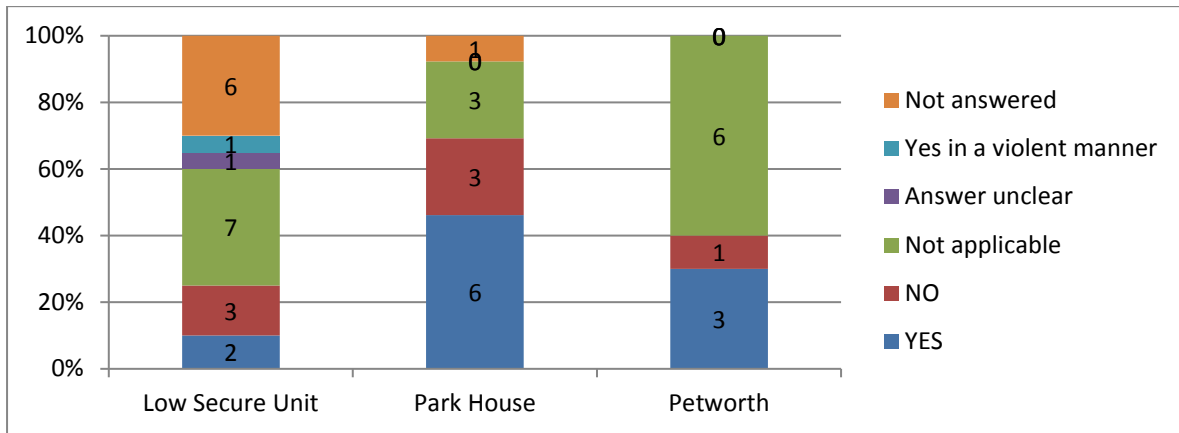
41. Do staff talk to you in a friendly manner?



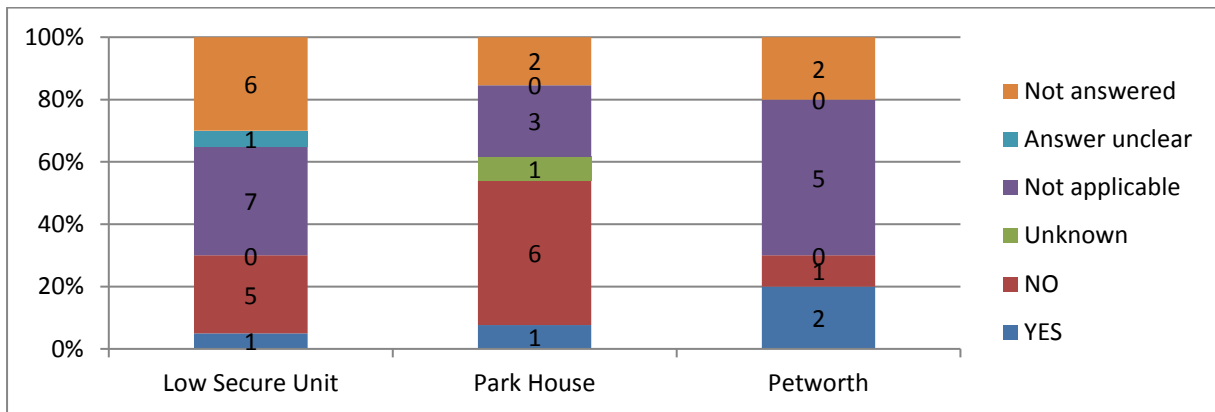
42. If staff have ever had to restrain you did you still feel that they treated you with dignity?



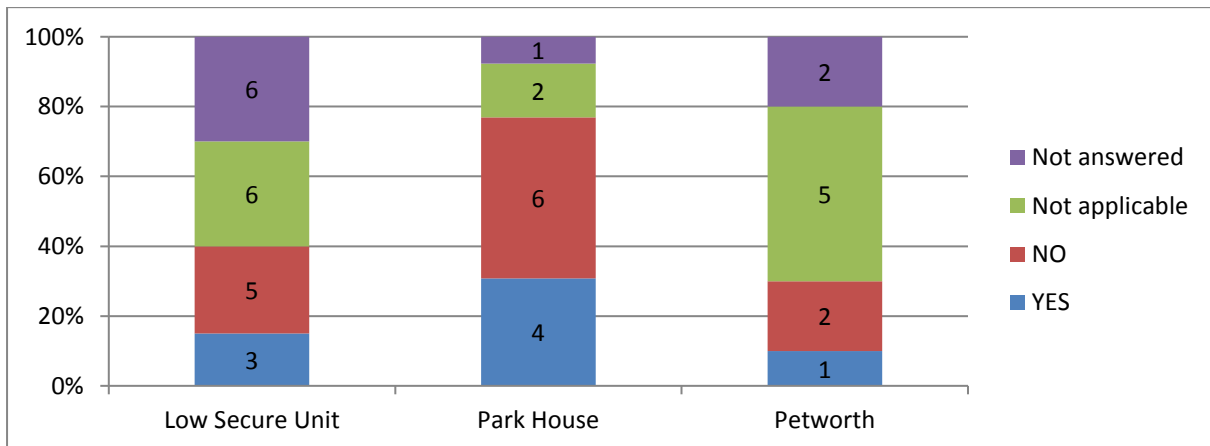
43. If staff ever had to restrain you, did someone explain to you afterwards why this was done?



44. If staff have ever had to restrain you were you given an opportunity to document their account of the intervention in your notes afterwards?



45. Have staff ever hurt you while restraining you?



46. If so please describe the event.

**Low Secure**

Don't remember it clearly

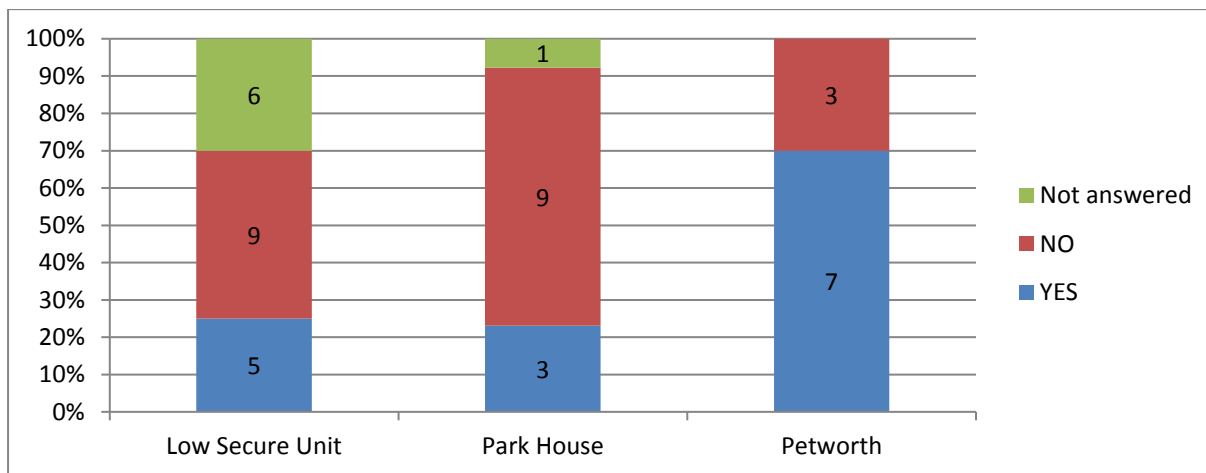
Twisted fingers

Beaten by staff who have been gone a long time

**Petworth**

Wrists

47. Have you ever witnessed a violent episode in St Magnus?



48. If so, did staff talk to you afterwards to see if you were upset by this and to support you if you needed support?

