

**Patient Experience Survey**

**Summary of results from November 2017 Survey**

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**Final Report  
February 2018**

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## Executive Summary

Therapeutic Apheresis Services (TAS) as part of the Diagnostic and Therapeutic Services Directorate within NHSBT delivers regional therapeutic apheresis services to adults and children in NHS trusts across England.

In 2013 in line with its strategic plan TAS established a base-line of patient satisfaction with annual surveys thereafter. The survey, conducted in 2013, set a baseline top box score of 95%. Top box scores are the percentage of answers scoring 9/10 or 10/10 to a key question on overall satisfaction. In this survey the top box question is Q7 'Your overall satisfaction of our service'.

This report reflects outcomes from a survey undertaken in November 2017 the results of which will be compared against the outcomes of the previous surveys.

This survey evaluated the views of adult and paediatric patients / donors (or their carer / relative) who received treatment from TAS in Bristol, Leeds, Liverpool, Manchester, Oxford, Birmingham, Sheffield and London.

Obtaining information on patient experience and acting on the outcomes to improve future experience is a requirement of the standards set out by the Care Quality Commission. The survey focuses on care and hospitality aspects of the service, staff demeanour and information provision. The same survey was used at all locations.

Answers to a total of 8 questions were scored on a scale of 1 (poor) to 10 (excellent) with extremely positive results from all locations and the highest levels of overall satisfaction across the survey since it commenced.

### Results:

- 211 questionnaires issued = almost double the number issued in 2016
- 170 questionnaires returned = 56% of all patients treated during the survey period
- Overall topbox score of 97% achieved = > 2017/18 strategic target of 95%
- Lowest topbox score given in any unit = 7

The top box result is similar to that of the Friends and Family Test for November 2017 for NHS inpatients at 96%. It is higher than the score for outpatients at 94%.

The quantitative data was accompanied by qualitative comments. These comments were extremely favourable with some minor indications for improvement.

The quantitative data, along with the comments provided by users of the services, reflect a very positive opinion of the staff and facilities in all the therapeutic apheresis units. The low numbers of patients seen by TAS does however mean that it is not possible to statistically analyse the data

A plan to provide every patient attending a TAS unit with a short snap shot questionnaire did not progress. On reflection it was felt in the end that this would be too difficult to manage with the high levels of repeat attendances to TAS units by patients with long term conditions. However a review of an alternative measure to elicit feedback from patients and relatives/carers possibly using IT is being looked at.

The annual measure of patient experience will continue with the next survey being conducted in November 2018.

## Introduction

Therapeutic Apheresis Services (TAS) is part of the Diagnostic and Therapeutic Services Directorate within NHSBT. Apheresis services are delivered from units or bases within NHS Trusts in Leeds, Bristol, Oxford, Sheffield, Liverpool, Birmingham, Manchester and London. The medical and nursing teams deliver a wide range of therapeutic apheresis treatments to patients from across England.

The treatments are provided using specialist machines which exchange, remove, or collect certain components within the blood through a process called Therapeutic Apheresis, which can then allow secondary treatment processes to take place.

Patients/donors completing the survey were undergoing a variety of treatments including:

- Therapeutic Plasma Exchange
- Red Cell Exchange
- Peripheral Blood Stem Cell collection
- Platelet depletion
- White Cell Depletion
- Low Density Lipid Removal
- Extracorporeal Photopheresis

TAS has a strategic objective to become the NHS preferred provider of high quality cost effective therapeutic apheresis services. In 2013, in line with its strategic plan, TAS established a base-line patient satisfaction score with subsequent annual measurements. The survey conducted in spring 2013 set a baseline top box score of 95%.

Top box scores are the percentage of answers scoring 9/10 or 10/10 to a key question on overall satisfaction. In this survey the top box question is Q7 'Your overall satisfaction of our service'. This report presents the findings from the sixth survey undertaken in November 2017. Results from the survey will be compared to those of the previous surveys with comparison to surveys undertaken in the wider NHS.

## Method

A paper based survey containing 8 questions was handed out to patients/donors and/or their family members or carers when attending the TAS unit or when attended to by TAS staff as an in-patient. Option was given to either complete the survey at the time of the appointment/treatment, or at a later date (a freepost return envelope was provided). Anonymity was maintained for all respondents.

The survey was carried out over a period of 1 month during November/December 2017. The survey questions cover staff attitude, care delivered and the environment. Each question is scored on a scale of 1 (poor) to 10 (excellent) with a comments field provided for each question and a general comments field provided at the end of the questionnaire.

Data from the questionnaires was analysed using Microsoft Excel.

## Results

Surveys were given to 70% (range 53% to 100%) of patients/donors treated during the survey period. 170 of 2111 questionnaires were returned; a return rate of 81%. This reflects 56% of all patients/donors treated during the survey period with return rates ranging from 55% to 93% reflecting an increasing overall trend in return rates. Table 1 shows return rate data from 2013 to 2017

**Table 1 - Total Surveys Received 2013 -2017**

| Survey Year | Patients given survey (%) | Surveys returned (%) | Returns/Patients Treated (%) | Comments   |
|-------------|---------------------------|----------------------|------------------------------|--|
| 2013        |                           | 57                   |                              | Data did not distinguish between patients and relatives/carers |
| 2014        |                           | 53                   | 38                           | Data did not distinguish between patients and relatives/carers |
| 2015        | 65                        | 59                   | 43                           |  |
| 2016        | 77                        | 75                   | 58                           |  |
| 2017        | 70                        | 81                   | 56                           |  |

E-mail instructions were sent to each unit relating to the distribution, completion and return process for the questionnaires. Table 2 indicates the number and percentage of patients treated, surveys issued and surveys returned from each site.

**Table 2 - Surveys Received by Unit 2017**

|                   | Patients Treated (n) | Surveys Issued (n) | Surveys Returned (n) | Surveys Returned (%) | Surveys not returned (n) | Patients given survey (%) | Patients returning survey (%) |
|-------------------|----------------------|--------------------|----------------------|----------------------|--------------------------|---------------------------|-------------------------------|
| <b>Birmingham</b> | 17                   | 9                  | 8                    | 89%                  | 1                        | 53%                       | 47%                           |
| <b>Bristol</b>    | 45                   | 38                 | 30                   | 79%                  | 8                        | 84%                       | 67%                           |
| <b>Leeds</b>      | 46                   | 30                 | 27                   | 90%                  | 3                        | 65%                       | 59%                           |
| <b>Liverpool</b>  | 40                   | 23                 | 20                   | 87%                  | 3                        | 58%                       | 50%                           |
| <b>London</b>     | 20                   | 20                 | 11                   | 55%                  | 9                        | 100%                      | 55%                           |
| <b>Manchester</b> | 35                   | 23                 | 13                   | 57%                  | 10                       | 66%                       | 37%                           |
| <b>Oxford</b>     | 56                   | 38                 | 33                   | 87%                  | 5                        | 68%                       | 59%                           |
| <b>Sheffield</b>  | 44                   | 30                 | 28                   | 93%                  | 2                        | 68%                       | 64%                           |
| <b>Total</b>      | <b>303</b>           | <b>211</b>         | <b>170</b>           | <b>81%</b>           | <b>41</b>                | <b>70%</b>                | <b>56%</b>                    |

Table 3 indicates the scoring distribution for each site across all questions. Answers to questions were scored on a scale of 1 to 10.

**Table 3**

|                          | Birmingham    | Bristol       | Leeds         | Liverpool     | London        | Manchester     | Oxford        | Sheffield     |
|--------------------------|---------------|---------------|---------------|---------------|---------------|----------------|---------------|---------------|
| Score                    | Frequency (%) | Frequency (%) | Frequency (%) | Frequency (%) | Frequency (%) | Frequency (%)  | Frequency (%) | Frequency (%) |
| <b>No Scores below 5</b> |               |               |               |               |               |                |               |               |
| 5                        |               | 1<br>0.42%    |               |               | 1<br>1.14%    |                |               |               |
| 6                        |               |               |               |               | 1<br>1.14%    |                |               |               |
| 7                        |               | 1<br>0.42%    |               |               |               |                | 2<br>0.76%    |               |
| 8                        |               | 8<br>3.36%    | 3<br>1.39%    | 2<br>1.25%    | 7<br>7.95%    |                |               | 1<br>0.45%    |
| 9                        | 2<br>3.17%    | 14<br>5.88%   | 14<br>6.48%   | 6<br>3.75%    | 26<br>29.55%  |                | 4<br>1.52%    | 4<br>1.79%    |
| 10                       | 61<br>96.83%  | 214<br>89.92% | 199<br>92.13% | 152<br>95.00% | 53<br>60.23%  | 103<br>100.00% | 258<br>97.73% | 219<br>97.77% |

Table 4 details the overall “Top box” score for question number 7 (Overall Experience) for 2017 by centre and overall topbox score for each year. It also shows for 2017 the “top box” score for each question. Figure 1 show the graph and trend line of overall experience form 2013-2017.

**Table 4**

| 2017                      | Birmingham  | Bristol          | Leeds       | Liverpool        | London     | Manchester       | Oxford     | Sheffield        | Total      |                  |  |                  |  |
|---------------------------|-------------|------------------|-------------|------------------|------------|------------------|------------|------------------|------------|------------------|--|------------------|--|
| Q1                        | 100%        | 83%              | 100%        | 95%              | 64%        | 100%             | 100%       | 100%             | 94%        |                  |  |                  |  |
| Q2                        | 100%        | 97%              | 96%         | 100%             | 91%        | 100%             | 100%       | 96%              | 98%        |                  |  |                  |  |
| Q3                        | 100%        | 97%              | 96%         | 100%             | 91%        | 100%             | 100%       | 100%             | 98%        |                  |  |                  |  |
| Q4                        | 100%        | 97%              | 96%         | 100%             | 91%        | 100%             | 97%        | 100%             | 98%        |                  |  |                  |  |
| Q5                        | 100%        | 97%              | 100%        | 95%              | 91%        | 100%             | 100%       | 100%             | 98%        |                  |  |                  |  |
| Q6                        | 100%        | 100%             | 100%        | 100%             | 100%       | 100%             | 100%       | 100%             | 100%       |                  |  |                  |  |
| Q7                        | <b>100%</b> | <b>97%</b>       | <b>100%</b> | <b>100%</b>      | <b>73%</b> | <b>100%</b>      | <b>97%</b> | <b>100%</b>      | <b>97%</b> |                  |  |                  |  |
| Q8                        | 100%        | 100%             | 100%        | 100%             | 100%       | 100%             | 100%       | 100%             | 100%       |                  |  |                  |  |
| <b>2013 – 2017</b>        |             | <b>Spring 13</b> |             | <b>Autumn 13</b> |            | <b>Autumn 14</b> |            | <b>Autumn 15</b> |            | <b>Autumn 16</b> |  | <b>Autumn 17</b> |  |
| <b>Overall Experience</b> |             | 95%              |             | 100%             |            | 100%             |            | 99%              |            | 93%              |  | 97%              |  |

**Figure 1**

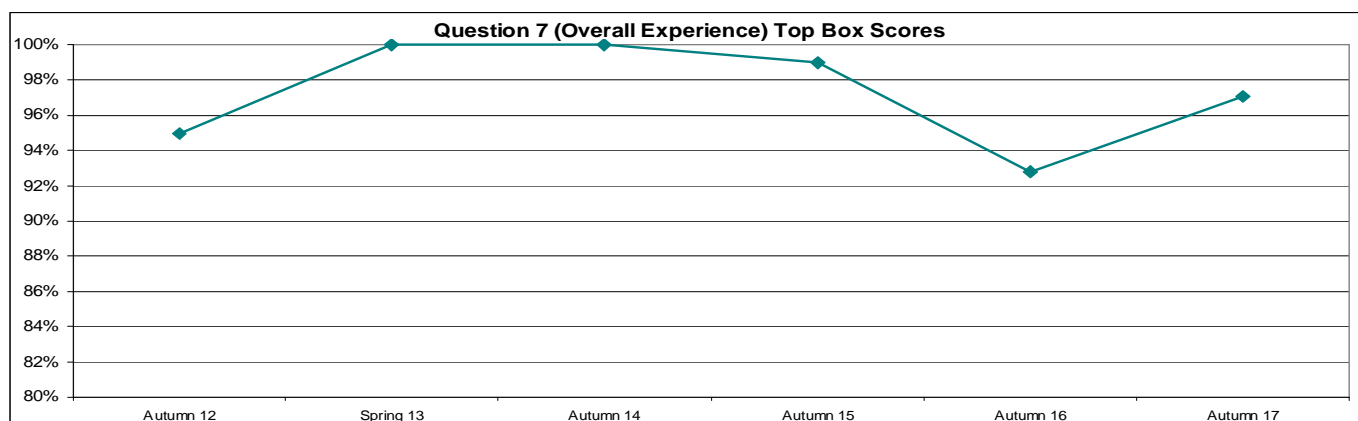


Table 5 and Figure 2 indicate the frequency of scores of 10 associated with each question expressed as a % of the total number of answers received for that specific question.

**Table 5**

| Question | Number of answers for question | Number of 10 scores | %   |
|----------|--------------------------------|---------------------|-----|
| Q1       | 170                            | 154                 | 91% |
| Q2       | 170                            | 155                 | 91% |
| Q3       | 170                            | 157                 | 92% |
| Q4       | 170                            | 154                 | 91% |
| Q5       | 170                            | 160                 | 94% |
| Q6       | 170                            | 162                 | 95% |
| Q7       | 170                            | 153                 | 90% |
| Q8       | 166                            | 162                 | 98% |

**Figure 2**

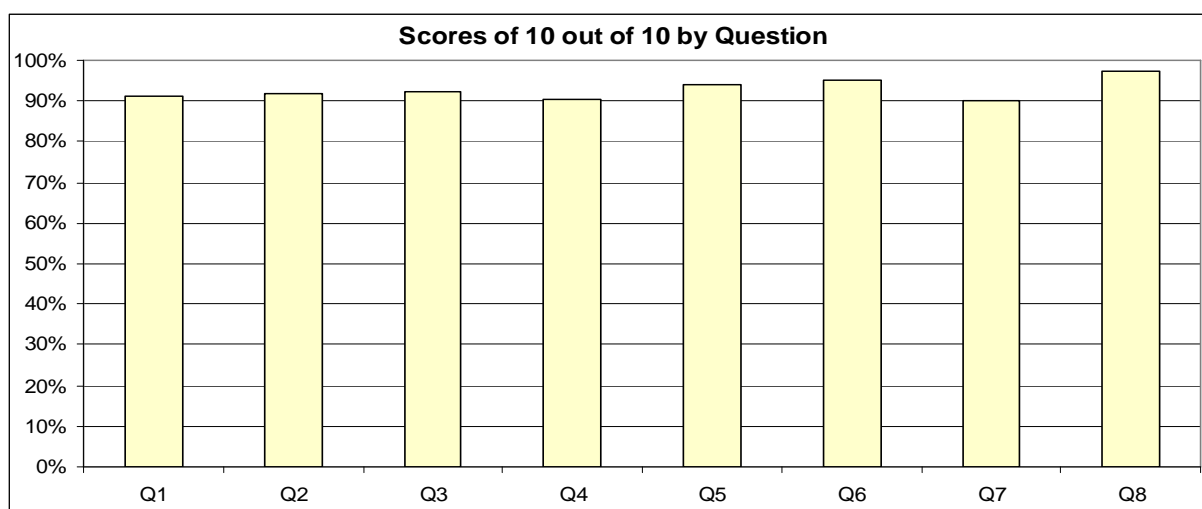
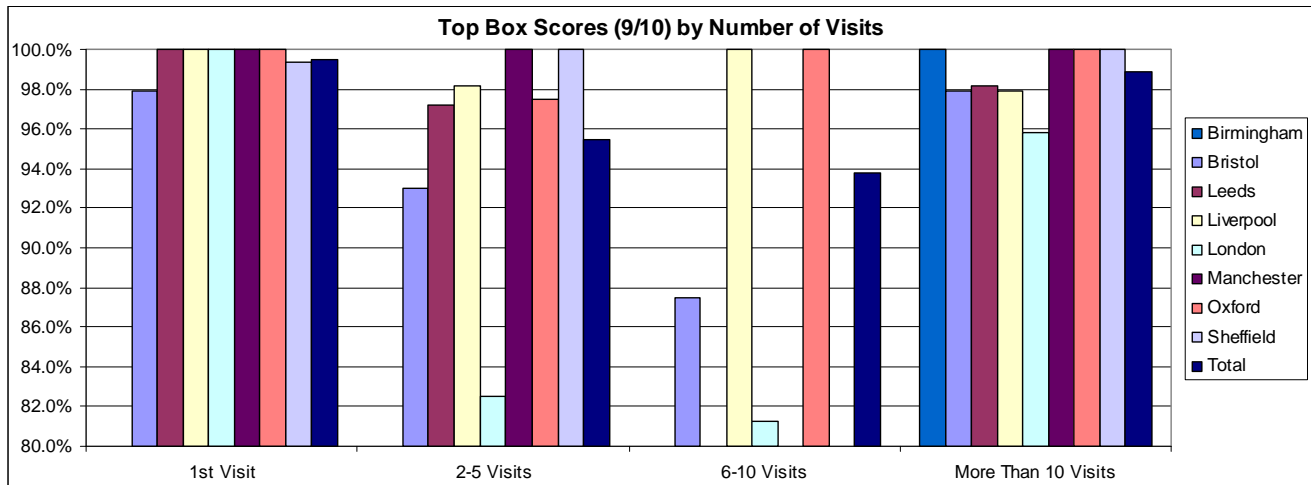


Table 6 and Figure 3 show results by procedure type and number of visits. It shows slightly lower scores in return from those who had 2-5 and 6 -10 visits compared to those who had 1 visit or more than 10 visits.

**Table 6**

|                                   | Stem Cell Collection |               |                 |            | Plasma Exchange | Photo-pheresis | Lipid (Cholesterol) Removal | Red Cell Exchange | Other      | Blank      |
|-----------------------------------|----------------------|---------------|-----------------|------------|-----------------|----------------|-----------------------------|-------------------|------------|------------|
|                                   | Patients             | Related Donor | Unrelated Donor | Total      |                 |                |                             |                   |            |            |
| <b>Birmingham</b>                 | 0                    | 0             | 0               | 0          | 0               | 0              | 0                           | 8                 | 0          | 0          |
| <b>Bristol</b>                    | 9                    | 3             | 1               | 12         | 2               | 11             | 1                           | 3                 | 0          | 1          |
| <b>Leeds</b>                      | 10                   | 5             | 0               | 15         | 5               | 0              | 0                           | 6                 | 1          | 0          |
| <b>Liverpool</b>                  | 4                    | 3             | 0               | 7          | 2               | 10             | 0                           | 0                 | 1          | 0          |
| <b>London</b>                     | 1                    | 0             | 0               | 1          | 1               | 2              | 0                           | 7                 | 0          | 0          |
| <b>Manchester</b>                 | 1                    | 0             | 0               | 1          | 0               | 12             | 0                           | 0                 | 0          | 0          |
| <b>Oxford</b>                     | 10                   | 3             | 0               | 13         | 10              | 8              | 0                           | 2                 | 0          | 0          |
| <b>Sheffield</b>                  | 7                    | 0             | 17              | 25         | 1               | 0              | 0                           | 0                 | 2          | 0          |
| <b>Total</b>                      | <b>42</b>            | <b>14</b>     | <b>18</b>       | <b>74</b>  | <b>21</b>       | <b>43</b>      | <b>1</b>                    | <b>18</b>         | <b>4</b>   | <b>1</b>   |
| <b>Number of Patients Treated</b> | <b>N/A</b>           | <b>N/A</b>    | <b>N/A</b>      | <b>77</b>  | <b>55</b>       | <b>78</b>      | <b>5</b>                    | <b>56</b>         | <b>8</b>   | <b>N/A</b> |
| <b>Percentage Returned</b>        |                      |               |                 | <b>96%</b> | <b>38%</b>      | <b>55%</b>     | <b>20%</b>                  | <b>32%</b>        | <b>50%</b> |            |

**Figure 3**



**Comparison against Baseline Survey**

Figure 4 demonstrates the number of scores of 10 for each question for this survey against the number of scored in previous surveys.

**Figure 4**

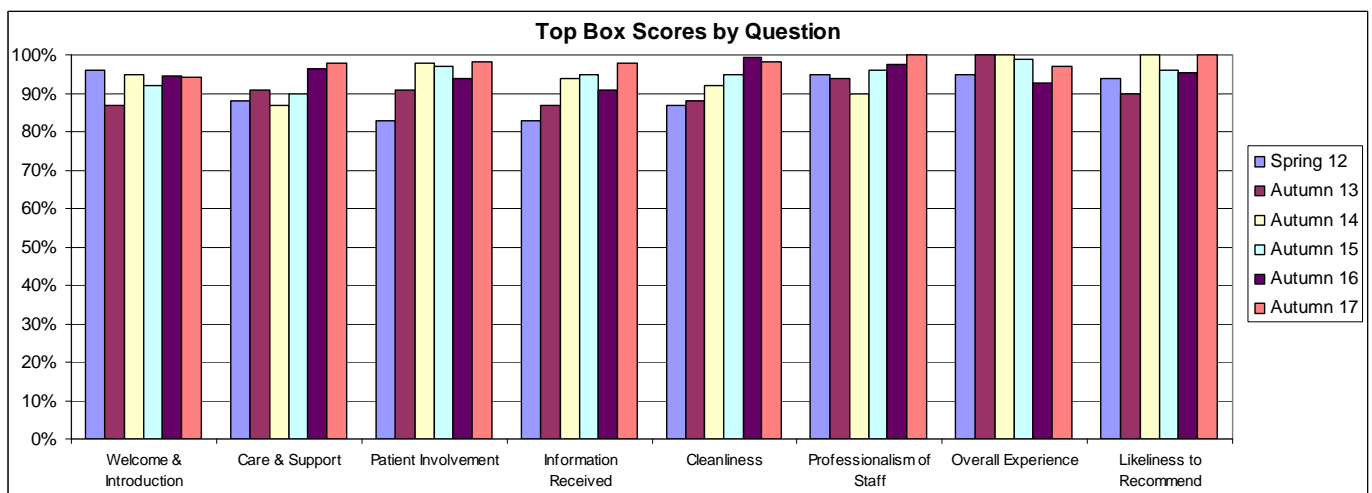
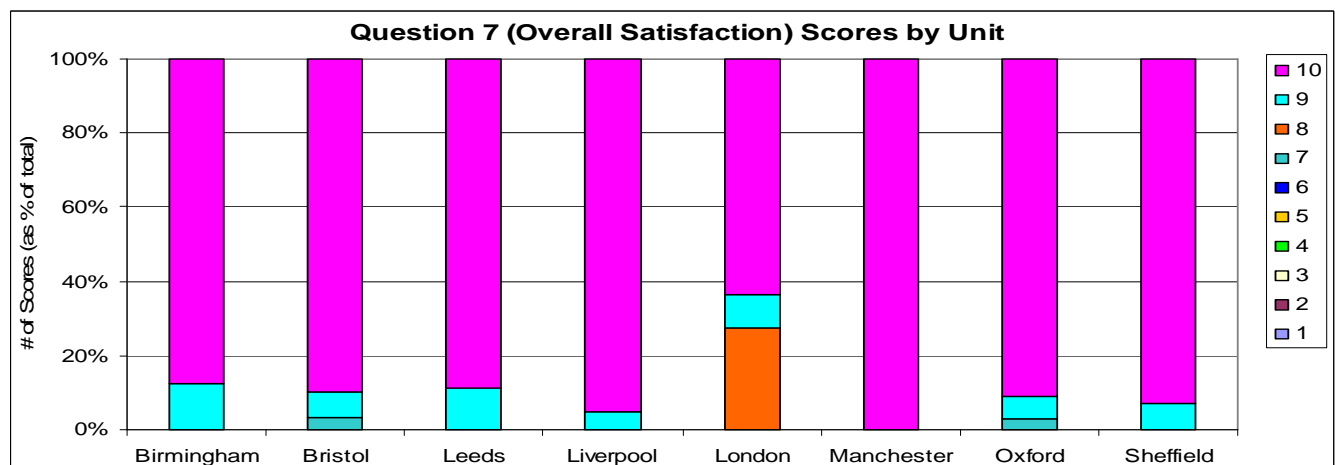


Figure 5 shows the distribution of the scores for Q7 (Overall satisfaction) for each unit in 2017.

**Figure 5**





## Qualitative Data

The quantitative data was supplemented by 278 comments. This is in excess of 100 more than in 2016 (with the 2016 number being almost double the number received in the 2015 survey). This increase is a result of the increased number of surveys issued and a very high percentage of returns from patients/donors having stem cell procedures (this group represent a “captive audience” undergoing what is generally the most lengthy procedure).

Comments were made to individual questions and in an overall general comments section. The vast majority of the comments were overwhelmingly positive and extremely complimentary to the nursing teams. There were no overt complaints, although one negative comment related to the manufacturer of the apheresis machine used for ECP. There were a few other comments which are worthy of review and follow up, in the main these related to access to TV/entertainment and WIFI and addressing these may improve future experience. Recommendations related to these have been made below.

Appendix 2 lists the full details of all comments received.

## Findings

The patient experience top box score for TAS continues to remain high at 97% of scores for Q7 on overall satisfaction scored at either 9 or 10 out of 10. This has increased since last year and results are taken from an increased number of surveys returned and would seem to indicate a real rise. The lowest score received for Q7 on overall satisfaction was 7 with only 5 scores less than 9 for this question. The lowest score received for any question in this survey was 5, with 98% of all questions scoring either 9 or 10 out of 10

Question 8 “likeliness to recommend” which equates to the “Family and Friends” test achieved a top box score of 100%.

No statistical analysis of the results is possible due to the low absolute numbers of surveys and numbers of patients/donors participating in the survey (despite these numbers representing a high percentage of the patient/donors treated during the survey period and the survey being conducted over a 4 week period).

There has been a marked increase in the return rate since the last survey. The overall return rate was 81% ranging from 55% to 93% this is the highest since surveys began with an overall percentage of surveys issued of 70% ranging from 53% to 100%. Lower issue and return rates in some units reflect procedure and patient types and repeat attendances. The overall number of surveys returned as a percentage of patients treated was 56% ranging from 37% to 67% again with lower numbers reflecting repeat attendances.

The lowest scoring questions were Q4 which relates to information received and Q5 relates to cleanliness of the unit. The low score to Q5 was given in London where all patients are inpatients treated at the bedside. (TAS does not have a physical unit and as such reflect the cleanliness of the Trust premises). The low score for Q4 was at Bristol however no comment was left by the person completing the questionnaire to indicate the nature of the shortfall. There were only 2 scores of 5 received in total with 98% of all questions scoring 9 or 10 out of 10.

Questions 2, 3 4 6 and 8 achieved their highest ever levels with only very slight difference between peak levels for questions 1, 5 and 7 and levels achieved for 2017.

5 of the 8 units obtained an individual top box score of 100%. Only 55 questions out of 1160 were scored less than 9 and only 12 (1%) scoring less than 8 and giving a top box score for all questions of 95%.

## Conclusion

The most noticeable point when comparing the current and previous surveys is the continued steady or upward trend of results following a step increase after the initial survey in 2013.

The 97% score for the Top box question (Q7) and 100% for the Friends and Family Test question (Q8) indicates a continued high level of satisfaction with the service provided by TAS.

Areas where a lower percentage of surveys have been issued equate with units with high levels of repeat attendance over the course of the survey period e.g. Manchester where many patients are treated 2 weekly and on 2 consecutive days. These patients would only have received 1 survey to complete and the overall number of patients being issued with surveys was very good at 70% with return rate at 56%

Clear instructions given out to units prior to the survey period have had an impact resulting in the high issue and return rates this time.

Some comments appear to be very specific to individual patients and individual procedures/visits eg comment regarding parking spaces which are not under the control of TAS units other than Oxford. One comment made by a relative, about the routine availability of weekend treatment, does appear to have influenced some scoring.

Some remaining minor comments eg around headphones, TV, snacks and drinks etc should be addressed specifically by the individual units.

The continued increase in scores of 10/10 indicates a continued positive direction in service provision despite the lower topbox score in this particular survey. This reflects the continued actions and efforts undertaken to address specific comments received in both annual surveys and snapshot surveys.

As in previous surveys, it is difficult to draw any hard conclusions because of the very high scoring, and small numbers involved in the variations. However, the consistently high levels of satisfaction and the upward trend apparent on the comparison graph continues to provide assurance of the provision of very high standards of care.

## Discussion

The qualitative data yields some suggestions for small local changes which could further improve the experience of future patients/carers/relatives. Suggestions in the qualitative data as well as quantitative data should help form the recommendations for action arising from this survey.

The development of a survey aimed at obtaining information on the experience of children needs to be developed and should be prioritised in order to include patients treated in children's hospitals especially at Great Ormond Street.

## Recommendations

1. Individual units should review their qualitative and quantitative data to establish local areas for improvement and undertake changes indicated and practicable.

**Action:** TAS Nursing Lead Care Quality Regulation and Governance to distribute survey and individual unit results to unit Lead Nurses and Consultants for review at Unit Governance meetings **(May 2018)**

**Action:** TAS Lead Nurses to ensure discussion of results and formation of action plans to address any changes identified from the survey results. **(July 2018)**

2. Patient information and a survey aimed specifically at obtaining information on the experience of children should be developed.

**Action:** TAS Lead Nurse and staff in Great Ormond Street to take the lead in producing patient information leaflets in conjunction with the Nursing Lead Care Quality Regulation and Governance to be added to the suite of controlled document leaflets **(November 2018)**

**Action:** TAS Lead Nurse and staff in Great Ormond Street to take the lead in producing a suite of patient experience surveys for children of different age groups **(November 2018)**

3. Results of the 2017 survey to be disseminated to all TAS staff, referring organisations and commissioners and other relevant departments and bodies.

**Action:** TAS Nursing Lead Care Quality Regulation and Governance to provide survey report for dissemination to relevant parties **(March 2018)**

**Action:** Business Support Manager to arrange for survey report to be placed on internal and external websites and distributed to relevant external stakeholders **(April 2018)**

4. Feedback on changes and improvements made as a result of findings, comments and suggestions in the survey should be reported in unit Clinical Governance reports.

**Action:** TAS Nursing Lead CQRG and TAS National Administration to Update - You Said/We Did feedback summary to be circulated for display in TAS units. **(August 2018)**

5. Top Box strategic targets should be reviewed as part of the TAS strategy re-fresh

**Action :** Chief Nurse to present new strategic targets to the NHSBT Board **(In 2018/19)**

## Appendix 1 - Patient Experience Survey Questionnaire

Please help us to improve our service by taking a few moments to complete this short feedback form. Your feedback is very important in helping us to identify how we can improve any aspects of our service and the care our patients and their families receive during their visit.

If you would like assistance to complete this form, please ask a family member, friend, or any member of our team.

*Please be assured that your feedback is completely anonymous.*


**Please indicate whether you are the:**

- Patient/Donor
- Patient's Relative/Carer

**Please indicate the reason you attended the unit:**

- Stem cell collection
- Plasma exchange
- Photopheresis
- Lipid (cholesterol) removal
- Red cell exchange
- Other (please detail)

.....  
**Was your procedure performed as part of a clinical/research trial?**

- Yes
  - No
- 

**How many procedures have you had?**

- 1<sup>st</sup> Visit     Between 1 and 5
- Between 6 and 10
- More than 10 — ongoing treatment

**Are you donating your stem cells to someone else?**

- Yes - a relative
- Yes - a unrelated party
- No
- N/A


Please give specific details or examples in the comment boxes.

Please also indicate your satisfaction with a score between 1 😞 and 10 😊 in the boxes provided.

**1. How satisfied were you with the welcome you received?**

😞 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 😊

How can we improve?



**2. How satisfied were you with the care and support you received?**

😞 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 😊

How could we do better?

**3. How satisfied were you with your involvement in your treatment and care?**

😞 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 😊

How could we have involved you more?

**4. How satisfied were you with the information you received?**

😞 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 😊

How could we improve the information?



5. How satisfied were you with the cleanliness of our unit and staff?

☹️ | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 😊

What could we do better?

[Empty text box for feedback]

6. How professional were the staff who cared for you?

☹️ | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 😊

How could we improve?

[Empty text box for feedback]

7. Please rate your overall experience of our service

☹️ | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 😊

Comments

[Empty text box for comments]

8. How likely would you be to praise/recommend our service to someone else who needed this procedure?

☹️ | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 😊

Comments

[Empty text box for comments]

What else could we do to improve your experience?

[Empty text box for feedback]

Please hand the completed form to any member of our team, or if you prefer, use the stamped addressed envelope to post it back to us.

# Therapeutic Apheresis Services



## Patient Experience Survey

Your Feedback Is Important To Us

Code: «Code»

**Appendix 2 – Details of Survey Qualitative Data**

| Q1 - Comment / improvement   | Q3 - Comment / improvement   |
|--|--|
| <p>I'm always happy with the two nurses that do my exchanges over in the SCAT centre.<br/>Nothing to improve. As always made me feel welcome :)</p> <p>Room is a little small could do with a bigger room. Especially when other visitors/consultants come to see what is going on<br/>Everyone are extremely helpful and welcoming<br/>There was nobody actually sat at the reception desk. I think we arrived at reception at 8:17<br/>More smiling faces<br/>Very friendly, welcoming and helpful. Explained what would be happening etc included me in treatment<br/>Faultless<br/>Do not think this could be improved<br/>We were previously shown around the unit when meeting with my husband's consultant. Everyone was friendly + informative and familiarising ourselves with the environment was really helpful<br/>Nothing<br/>The improvement isn't needed, the service is good<br/>You can't it's all good and great staff<br/>No improvement needed<br/>All staff friendly and inquisitive re my treatment explained fully to me what was going to happen.<br/>Reliable- each week has taken place as required. The team made it happen.<br/>Both Nancy and Mary were very friendly and made Hannah feel relaxed.<br/>Very pleased you could not get a better team of nurses.<br/>As far as I'm concerned you can't. It's always a warm personal welcome and you are made comfortable and put at ease.<br/>I personally have had no problems what so ever with the procedures or staff.<br/>I would say that the whole team are wonderful and it would be difficult to improve their performance<br/>No way<br/>I felt completely at ease from the moment I entered. I think you could not do more to improve this service<br/>Very pleased<br/>Nothing<br/>Always welcomed with laughter and a smile!<br/>Everyone most welcoming<br/>I always have a warm welcome at NHSBT<br/>None - you are best, all was professional<br/>Very satisfied</p> | <p>I am always kept up to date with the plan for my treatment. Everything has always been explained to me<br/>They told us every step that we would be through in a easy and understanding way<br/>faultless<br/>I don't know<br/>All my questions fully answered<br/>My son GVHD is at bay and the BMT practitioners have managed to decrease steroids as per plan.<br/>Liaising with patient by email regarding changes to the service/department.<br/>No involvement required just good explanation. Felt able to ask any questions we had.<br/>I HAVE BEEN INVOLVED. THEY HAVE EXPLAIN TO ME EVERYTHING<br/>I feel involved in the whole process from start to treatment reviews.<br/>I always feel involved in any changes that are to be made.<br/>I feel very involved in the treatment, results and outcomes<br/>Again from the first time of my first appointment, I was told fully what was going on and what to expect<br/>Perfect<br/>Almost a part of it - excellent!!!<br/>All staff kept us informed when asked<br/>None<br/>Everything was done<br/>Fully informed at all times, very friendly, knowledgeable.<br/>I was fully informer and engaged.<br/>A pleasure.</p> |

|   |  |
|---|--|
| <p>Staff are extremely welcoming and warm. They put my nerves at ease and it was lovely to get to know them.<br/>         Nothing to add<br/>         Keep being yourselves<br/>         Great friendly staff<br/>         All nurses very friendly<br/>         I was totally happy with everything.</p> |  |
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| Q2 - Comment / improvement  | Q4 - Comment / improvement   |
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| <p>The care is very good<br/>         Always happy with the care and support I receive<br/>         faultless<br/>         Very<br/>         I don't think so<br/>         I don't think you can improve<br/>         Building the service and extending and extending the department programme for patients in need of the service<br/>         Care was excellent, everything clearly explained.<br/>         Again care and support is at forefront of treatment. I can't see any scope for improvement.<br/>         Carry on doing what they are doing.<br/>         The staff are all most caring<br/>         No way<br/>         Again I think that in my opinion nothing<br/>         Very<br/>         Relevant machines and analysers functioning and available without waits<br/>         Support and care are there, the moment you enter the unit!!!<br/>         Would be difficult<br/>         You are perfect, kindly staff, nothing could be better<br/>         Nothing to add<br/>         You can't!!!<br/>         Possibly offered pain relief or explained what pain relief I could have<br/>         Very attentive, always happy to help.<br/>         Staff are amazing - so friendly and helpful!<br/>         The staff were amazing.</p> | <p>Lots of treatment I am receiving<br/>         Perhaps it could have arrived a little earlier?<br/>         faultless<br/>         The nurse administering my husbands treatment was able to answer my questions had in a clear and friendly manner<br/>         No<br/>         Full information given, all questions answered<br/>         Print offs and at length discussion<br/>         Information told us what we needed. Was please to find the same leaflet online when I'd looked prior to treatment.<br/>         MAKE LEAFLET FOR KIDS<br/>         All very open and honest. Any questions are answered fully.<br/>         Again always kept well informed<br/>         That would be difficult<br/>         I was given full info as to what was happening in leaflets and by doctors and nurses<br/>         Very informative<br/>         Nothing<br/>         As a patient, it is to ask - the information is always given with time and pleasure!<br/>         Couldn't get plasma exchange over the weekend<br/>         Very good communication<br/>         No, you give all the information what we need<br/>         All information was given and all possible available answers were given to questions asked.<br/>         Extremely professional<br/>         Really impressed with staffs knowledge<br/>         All questions were answered.<br/>         I felt fully informed</p> |

| Q5 - Comment / improvement  | Q6 - Comment / improvement   |
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| <p>Always spotless<br/>excellent<br/>Cant see where<br/>Nothing<br/>It's perfect<br/>Cannot see that it can be.<br/>Keep confirming with the ward staff calendar arrangements<br/>The toilets in the ward were not clean<br/>Staff were fine. Treatment took place in an regular unit (Evelina Dialysis)<br/>THE STAFF ALWAYS DOING THE RIGHT THING. CLEANING HANDS, PUTING GLOVES ON<br/>AND CLEANING EVERYTHING<br/>Staff are smart and the day unit is very clean. Beds/chairs are cleaned before each use<br/>Never had any issues.<br/>The staff are always most meticulous in their and unit cleanliness<br/>Spotless<br/>Very good<br/>Immaculate!!!<br/>Couldn't fault it<br/>I feel safe in the unit - free of dirty places - well done<br/>Very clear<br/>Very clean and tidy.<br/>Lots of hand washing.</p>  | <p>Love the SCAT team<br/>They was very good<br/>Always professional<br/>nothing<br/>cant see where<br/>Always liaised with consultants (ECP &amp; BMT) when concerns arose i.e. Temperature.<br/>Very professional. Couldn't ask for more.<br/>VERY PROFESSIONAL. I AM HAPPY WITH ALL OF THEM, ESPECIALLY WITH THE<br/>PROFESSIONAL AND KIND NANCY<br/>Highly professional. I have complete trust in all of them.<br/>Can't fault them. Very professional &amp; friendly.<br/>You have got it right now<br/>Exceptional<br/>All are professional and engaging<br/>Excellent<br/>How professional can you get - wonderful, great!!<br/>Very<br/>Very and even after capped the line<br/>Nothing could be improved<br/>ALWAYS<br/>Very nice<br/>All the nurses were great. There was an hour delay to see the consultant.<br/>Professional and friendly.</p>  |
| Q7 - Comment / improvement  | Q8 - Comment / improvement   |
| <p>Have never had any problems always made me feel welcome on all my visits. Staff are really<br/>nice<br/>The staff member(s) that look after me are great, they give high quality care so there isn't much I<br/>can recommend in order to improve<br/>Excellent care and service from all staff. Brilliant team work.<br/>Overall experience has been great. Staff are always welcoming and I can not fault anything<br/>Staff always behave professionally and caring<br/>I felt a bit in limbo because although the staff at Southmead said I should be having a stem cell<br/>collection on 21/21 November I didn't hear from the Oncology centre for quite some time and<br/>that was a little unsettling.<br/>PARKING!!<br/>Could not have been better, Great WIFI, 30x faster than I get at home<br/>A fantastic team of nurses! Amazingly supportive to us all as a family. Although not always the<br/>easiest patient, the staff have looked after son to the highest standard we could ever ask! Thank<br/>you all - so much!<br/>faultless<br/>Brilliant service<br/>Amazing unit, nurses + assistant<br/>Staff all great and very nice.<br/>Friendly, excellent service<br/>All the nursing staff were all so caring</p> | <p>From having blood transfusions to exchanges I feel a lot better. Staff are always welcoming<br/>I cannot fault the service<br/>Very good service<br/>Valuable services<br/>I would always recommend here to anyone. The care and support is always amazing.<br/>Every time!<br/>The service and staff are outstanding<br/>without hesitation<br/>Staff Lovely<br/>They did a good job and I'm happy for the service provided<br/>I would praise you all and all the staff<br/>Praise and recommend this treatment and the nurses<br/>Very trusting nurses. Excellent at the job they do, I have a needle phobia, and I trust these<br/>nurses.<br/>Staff competent in machine use. No wastage of cells or donor blood during use.<br/>Good service, arranged very quickly when need identified.<br/>VERY LIKELY, BECAUSE IS A GREAT STAFF, WHO KNOWS PERFECTLY HOW TO DO<br/>THEIR JOB. THEY KNOW HOW TO DEAL WITH CHILDREN.<br/>I would recommend this team of nurses to everyone.<br/>No hesitation<br/>Could not praise enough</p> |



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| <p>Fantastic nursing staff, make you feel relaxed.<br/>         Friendly staff fully explain procedures to me, keep me at ease throughout.<br/>         Punctual and reliable<br/>         Unfortunately there were some day when, due to circumstances beyond their control. The nurses were hours later than expected. A phone call to let us know would have been nice.<br/>         EVERYTHING IS PERFECT<br/>         In my view it's a brilliant service.<br/>         Continue what you're doing No complaints at all.<br/>         All the staff are most informative and friendly and I feel really at home on my visits<br/>         Can't fault anything.<br/>         All staff acted beyond the caring needed to put me at ease. My treatment was first class. Thank you<br/>         I wish all staff at hospitals were as caring and understanding<br/>         A lovely friendly environment for which we are thankful.<br/>         Fantastic care. Cheerful despite being very busy, still having time to listen and make me relax and be comfortable<br/>         Perfect<br/>         Truly - 10 out of 10!!<br/>         Wish plasma exchange could have been done over the weekend<br/>         Anything or anyone that's possibly going to help my child recover deserves a bonus. Pay rise for the lovely nurses.<br/>         Excellent service<br/>         Little bit long waiting for blood to arrive but no other problems<br/>         Nothing negative to add<br/>         Made as quick and easy as possible. Great staff<br/>         Other than the wait it was all good.<br/>         For my treatment and service I felt very safe and if I needed anything the staff were very helpful.</p> | <p>If needed highly recommend<br/>         At a time of great stress and worry we could not have asked for a better caring experience. Every person has treated us with kindness and professionalism which greatly helped us through this frightening time. I cannot praise them and the excellent clean and bright surroundings enough. You have provided the most amazing, wonderful care, thank you so much.<br/>         Highly recommend<br/>         Fantastic, love the staff - very friendly and easy to approach<br/>         If somebody has the chance to come here, wonderful!!<br/>         I couldn't fault it<br/>         Thank you for your help today. You have been very kind and helpful.<br/>         Yes definitely will recommend you<br/>         1 hospital visit in past year compared to 3-4 before I started treatment<br/>         Very good<br/>         Hannah was excellent. Very knowledgeable and caring.<br/>         No need for improvement<br/>         A special thank you to lead nurse Louise, excellent knowledge and care received personally :)<br/>         No real complaints.<br/>         All staff are brilliant at making you feel at ease. Make the day a pleasant experience. I would recommend this service to and of my friends or anyone who spoke to me about the service at this hospital.</p> |
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| <b>General Comments Question -<br/>           What else could improve the experience?</b>  |   |
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| <p>There is honestly nothing else :)<br/>           Would like a TV for room just to make the time being here go quicker and to be entertained<br/>           I think the service is excellent and much needed<br/>           Nothing. I always receive a friendly and professional service which I can't fault. Thank you!<br/>           All very satisfactory<br/>           For kids possibly prime machine with blood outside room to minimise time/noise in room<br/>           Nothing. I have had great service and all the staff are great<br/>           Earlier communication!<br/>           Provide disabled parking!<br/>           Outside your control but transport to the unit can be a nightmare!<br/>           Nothing - we have no negative comments regarding the team or the service provided.<br/>           Nothing. I am treated with care and kindness<br/>           No Improvement needed, could not ask for more<br/>           To continue the good work. Thank you for your care.<br/>           perhaps a more comfortable chair/bed<br/>           Cant think of a thing<br/>           As far as an experience like this can be described as pleasurable- it was. Nice bright modern unit comfortable facilities and knowledgeable and friendly staff<br/>           Excellent</p> | <p>Can't identify anything. I think you should focus future questionnaires on what you do well rather than what you can improve. You provide an excellent service with limited resources.<br/>           Thank you.<br/>           Stop the builders banging. Have a nice china mug for tea. Better heating control for patients with bare arms under treatment for long periods. Overall a great experience at ECP.<br/>           Just continue to do as you are. You do a brilliant service.<br/>           Take care of my nurses and pay them better without them needing to go on strike because I need them<br/>           1. Provision of wireless headsets to enable TVs to be watched without disturbing others in the unit. 2. Majority of patient tables are broken, i.e. they do not stay at the selected height when loaded with a laptop!<br/>           Nothing!<br/>           Nothing. Everything very good and thanks<br/>           Always have a lovely experience for a difficult procedure. No improvement necessary.<br/>           Nothing<br/>           Nothing - with grateful thanks to everybody involved and the caring and loving team who have improved my life!!!<br/>           Perhaps have the treatment available 7 days a week. Hire more staff to ensure that anyone needing plasma exchange can have it when needed not when it's convenient for staff</p> |

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| <p>Myself and my husbands experience both on the previous tour of the unit and when my husband received his stem cell collection treatment could not have been better from both a comfort and service point of view. Perhaps free parking and warm food would enhance our experience</p> <p>Staff has always been very helpful. I can't think of anything changing.</p> <p>Nothing, keep up the great work ladies.</p> <p>Nothing and I would like to thank all the staff for doing a great job.</p> <p>Very professional, efficient, friendly and answered all my questions.</p> <p>It's perfect enough</p> <p>Appointment times given as far ahead as possible to allow for planning others around them.</p> <p>More comfortable beds.</p> <p>I have had a first class experience, knowledgeable staff fully explained procedures to me and kept me at ease and relaxed throughout, nothing has been too much trouble.</p> <p>Nothing</p> <p>More comfortable beds.</p> <p>Maybe music or TV for the long hours processes</p> <p>T.V</p> <p>The ward always aware of the plan in terms of arranged dates and other things ready.</p> <p>Increase budget for department and increase the number of qualified staff to carry out the procedure.</p> | <p>Given what you are trying to achieve, I think you have it about right and are providing an excellent service. Staff were all very positive and helpful.</p> <p>Nothing! Very welcoming staff - attentive and friendly. Thank you.</p> <p>Nothing. Thank you very much for all your care to me. Well done for your job and to all the team. It was a pleasure to be here, special congrats for my nurse E. Pereira - really professional and kind with me.</p> <p>Nothing - FANTASTIC</p> <p>Give the manufacturer of the ECP a hard time, it is temperamental and doesn't always work.</p> <p>The manufacturer should know patient care is affected negatively.</p> <p>There is nothing I would improve; the people are amazing and really friendly people. I couldn't ask for better treatment.</p> <p>Nothing</p> <p>Nothing to improve upon. Thank you for an amazing experience. Lovely to meet a student nurse and a volunteer.</p> <p>Nothing! The staff on the ward are the epitome of what a good nurse should be, competent but still friendly enough to have a laugh. They need a 1000% raise.</p> <p>A personal TV</p> <p>It was all very good. Keep on doing an amazing job!</p> <p>Nothing. Excellent all round.</p> <p>Nothing - all fab!</p> <p>Perhaps a TV.</p> <p>My experience was extremely good today and therefore I really could not find any fault with the staff of treatment centre.</p> |
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