Patient Experience Survey

Summary of results from November 2016 Survey

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Executive Summary

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

The TAS 2012 to 2017 strategy included plans to establish a baseline of patient satisfaction with annual surveys following establishment of this baseline. The survey conducted in August 2012 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 2016 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 treatments at the TAS apheresis units based in Bristol, Leeds, Liverpool, Manchester, Oxford and Sheffield. Because of the small numbers of patients treated the TAS service delivered out of Great Ormond Street Children’s Hospital (GOSH) was not included in this survey. A separate survey is being carried locally over longer period at GOSH and results will be included in the November 2017 survey. The new TAS red cell exchange service delivered out of City Hospital in Birmingham which commenced in August 2016 will also be included in the November 2017 survey.

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). 110 questionnaires were returned (which reflects 58% of all patients treated during the survey period).

Extremely positive results were received from all locations and an overall top box score of 93% was achieved. This falls short of the strategic target, which for 2016/17 was to achieve a top box score = or > than 98%, however the level of satisfaction is at its highest overall since the surveys commenced and the trend remains positive.

The top box result is similar to that of the Friends and Family Test for NHS outpatients in November 2016. This reported an overall recommendation score of 93% (although the equivalent question in the TAS survey question 8 achieved an overall top box score higher of 95%).

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 the therapeutic apheresis units. The low numbers of patients does however mean that it is not possible to statistically analyse the data.

TAS also employs a snapshot experience measure in an endeavour to elicit further real-time feedback on specific tangible measures which could improve experience of the service. This takes the form of a feedback survey of 3 questions “What should we stop doing?”, “what should we continue doing?” and “What should we start doing?” This measure has provided limited feedback since its introduction in 2015 and this is felt to be due to the limited time spent by patients and visitors in waiting areas where the questionnaires are generally placed. From April 2017, TAS plans to directly give each new patient visiting the unit a copy of the questionnaire in an attempt to increase feedback.

The annual measure of patient experience will continue with the next survey being conducted in November 2017.
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 completing the survey were undergoing a variety of treatments including:

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

The TAS 2012-17 strategy sets out a plan for TAS to become the NHS preferred provider of high quality cost effective therapeutic apheresis services. The strategy included a plan to establish a baseline of TAS patient and donor satisfaction with a subsequent annual measurement. A baseline satisfaction score of 95% was established following the first survey in 2012 and annual surveys are now carried out in November each year. This report presents the findings from the fifth survey undertaken in November 2016. 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 by TAS staff as an in-patient. Options were 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 2016. 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 77% (range 44% to 100%) of patients/donors treated during the survey period. 110 questionnaires were returned; a return rate of 75%. This reflects 58% of all patients/donors treated during the survey period with return rates ranging from 43% to 89% reflecting an increasing overall trend in return rates. Table 1 shows return rate data from 2013 to 2016

Table 1

<table>
<thead>
<tr>
<th>Survey Year</th>
<th>Patients given survey (%)</th>
<th>Surveys returned (%)</th>
<th>Returns/Patients Treated (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>57</td>
<td>57</td>
<td></td>
</tr>
<tr>
<td>2014</td>
<td>65</td>
<td>59</td>
<td>43</td>
</tr>
<tr>
<td>2015</td>
<td>77</td>
<td>75</td>
<td>58</td>
</tr>
<tr>
<td>2016</td>
<td>77</td>
<td>75</td>
<td>58</td>
</tr>
</tbody>
</table>

E-mail instructions were sent for 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

<table>
<thead>
<tr>
<th>Site</th>
<th>Patients Treated (n)</th>
<th>Surveys Issued (n)</th>
<th>Surveys Returned (n)</th>
<th>Surveys Returned (%)</th>
<th>Surveys not returned (n)</th>
<th>Patients given survey (%)</th>
<th>Patients returning survey (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bristol</td>
<td>43</td>
<td>33</td>
<td>21</td>
<td>64%</td>
<td>12</td>
<td>77%</td>
<td>49%</td>
</tr>
<tr>
<td>Leeds</td>
<td>29</td>
<td>24</td>
<td>20</td>
<td>83%</td>
<td>4</td>
<td>83%</td>
<td>69%</td>
</tr>
<tr>
<td>Liverpool</td>
<td>35</td>
<td>32</td>
<td>15</td>
<td>47%</td>
<td>17</td>
<td>91%</td>
<td>43%</td>
</tr>
<tr>
<td>Manchester</td>
<td>20</td>
<td>14</td>
<td>14</td>
<td>100%</td>
<td>0</td>
<td>70%</td>
<td>70%</td>
</tr>
<tr>
<td>Oxford</td>
<td>43</td>
<td>24</td>
<td>23</td>
<td>96%</td>
<td>1</td>
<td>56%</td>
<td>53%</td>
</tr>
<tr>
<td>Sheffield</td>
<td>19</td>
<td>19</td>
<td>17</td>
<td>89%</td>
<td>2</td>
<td>100%</td>
<td>89%</td>
</tr>
<tr>
<td>Total</td>
<td>189</td>
<td>146</td>
<td>110</td>
<td>75%</td>
<td>36</td>
<td>77%</td>
<td>58%</td>
</tr>
</tbody>
</table>

Tables 3 and 4 indicate the scoring distribution for each site across all questions. Answers to questions were scored on a scale of 1 to 10.

Table 3

<table>
<thead>
<tr>
<th>Site</th>
<th>Bristol</th>
<th>Leeds</th>
<th>Liverpool</th>
<th>Manchester</th>
<th>Oxford</th>
<th>Sheffield</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of surveys returned</td>
<td>21</td>
<td>20</td>
<td>15</td>
<td>14</td>
<td>23</td>
<td>17</td>
</tr>
<tr>
<td>Total number of questions</td>
<td>168</td>
<td>160</td>
<td>120</td>
<td>112</td>
<td>184</td>
<td>136</td>
</tr>
<tr>
<td>Number of questions left blank</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>0</td>
</tr>
</tbody>
</table>
Table 4

<table>
<thead>
<tr>
<th>Score</th>
<th>Bristol</th>
<th>Leeds</th>
<th>Liverpool</th>
<th>Manchester</th>
<th>Oxford</th>
<th>Sheffield</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Frequency (%)</td>
<td></td>
<td>Frequency (%)</td>
<td>Frequency (%)</td>
<td>Frequency (%)</td>
<td>Frequency (%)</td>
</tr>
<tr>
<td>5</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>1.20%</td>
<td>0.60%</td>
<td>0.85%</td>
<td>0.00%</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>6</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0.60%</td>
<td>0.60%</td>
<td>0.00%</td>
<td>0.00%</td>
<td>0.55%</td>
<td>0.00%</td>
</tr>
<tr>
<td>7</td>
<td>0</td>
<td>3</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>0.00%</td>
<td>1.81%</td>
<td>1.71%</td>
<td>0.00%</td>
<td>0.00%</td>
<td>0.69%</td>
</tr>
<tr>
<td>8</td>
<td>6</td>
<td>4</td>
<td>10</td>
<td>6</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>3.61%</td>
<td>2.41%</td>
<td>8.55%</td>
<td>5.41%</td>
<td>1.66%</td>
<td>0.69%</td>
</tr>
<tr>
<td>9</td>
<td>18</td>
<td>14</td>
<td>11</td>
<td>10</td>
<td>11</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>10.84%</td>
<td>8.43%</td>
<td>9.40%</td>
<td>9.01%</td>
<td>6.08%</td>
<td>0.00%</td>
</tr>
<tr>
<td>10</td>
<td>139</td>
<td>143</td>
<td>93</td>
<td>95</td>
<td>166</td>
<td>142</td>
</tr>
<tr>
<td></td>
<td>83.73%</td>
<td>86.14%</td>
<td>79.49%</td>
<td>85.59%</td>
<td>91.71%</td>
<td>98.61%</td>
</tr>
</tbody>
</table>

Table 4 details the “Top box” score which is the number of answers scored at 9 and 10 out of 10 for question number 7 (Overall Experience).

Table 5

<table>
<thead>
<tr>
<th>Site</th>
<th>Bristol</th>
<th>Leeds</th>
<th>Liverpool</th>
<th>Manchester</th>
<th>Oxford</th>
<th>Sheffield</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of answers for Q7</td>
<td>21</td>
<td>21</td>
<td>14</td>
<td>14</td>
<td>22</td>
<td>18</td>
<td>110</td>
</tr>
<tr>
<td>Number of 9 scores</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>Number of 10 scores</td>
<td>17</td>
<td>18</td>
<td>10</td>
<td>12</td>
<td>19</td>
<td>17</td>
<td>93</td>
</tr>
<tr>
<td>Total (%)</td>
<td>20(95%)</td>
<td>19(90%)</td>
<td>12 (86%)</td>
<td>13(93%)</td>
<td>21(95%)</td>
<td>17(94%)</td>
<td>102(93%)</td>
</tr>
</tbody>
</table>
Figure 1 indicates the frequency of scores of 10 associated with each question expressed as a % of the total number of answers received for that specific question.

**Figure 1**

![Bar chart showing scores of 10 for each question across different locations.](image)

The results were analysed by procedure type and number of treatments received, however the scores showed no variance in overall satisfaction.

**Comparison against Baseline Survey**

Figure 2 demonstrates the number of scores of 10 for each question for this survey against the number of scored in previous surveys.

**Figure 2**

![Bar chart comparing scores across different locations and time periods.](image)
Figure 3 shows the distribution of the scores for each unit.

Figure 3

![Bar chart showing the distribution of scores for each unit.]

Figure 4 shows the distribution of the scores for Q7 (Overall satisfaction) for each unit.

Figure 4

![Bar chart showing the distribution of scores for Q7.]

**Qualitative Data**

The quantitative data was supplemented by 185 comments. This is highest number of comments received and almost double the number received in the 2015 survey. The increase may be a result of the high percentage of returns from patients/donors having stem cell procedures and may represent a “captive audience” and undergoing what is generally the most lengthy of the procedures.
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, however there were a few comments which are worthy of review and follow up.

Appendix 2 lists the full details of all comments received.

Comments received which included suggestions for improvements include:

- “A lot of information to process. Perhaps receive consent form sooner, and a couple of reminders”
- “A slightly larger room as I could see when patients arrived. It was a little congested for staff to move. In particular 1x table dangerous, wobbly leg.”
- “Only thing sometimes you have bit of waiting around”
- “Provide headphones for patients watching TV so that their enjoyment does not spoil things for others”
- “Snack/drink provision inconsistent”
- “The only thing was time/boredom, so possibly a radio or TV would pass time easier”.

Findings

The patient experience top box score for TAS continues to remain high at 93%. It has however dropped from the last survey and is below the target set within the current strategic plan. The lowest score received for any question in this survey was 5, however 95% of questions scored either 9 or 10 out of 10 All but 8 of the top box questions on overall satisfaction was scored either 9 or 10 out of 10 with a single score of 7 being the lowest score received for this question.

Question 8 which constitutes the “Family and Friends Test” question also obtained a top box score of 95%.

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 77% despite the poor return rate in Liverpool. Manchester achieved the highest rate at 100% having had the lowest rate in 2015 followed by Oxford, who despite having issued to the lowest percentage of patients achieved a return rate of 96%. The return rate in Liverpool is noticeably lower than the other units at 47%, this does however represent an increase from 35% in 2015. The total number of questionnaires given out continues to increase with 146 issued during the current survey compared with 126 in 2015, 120 in 2014 and 123 in 2013.

There has been a marked increase in the return rate as a percentage of the number of patients treated with Sheffield achieving 89% compared to a high of just over 60% in 2015.

The lowest scoring question was Q8, which relates to “Recommendation of service to others”, Q5 which relates to “Information received” and Q1 which relates to “Welcome” with Q8 receiving 2 scores of 5 and Q1 and Q5 receiving 1 score of 5.

There has been a continued increase in the percentage of surveys scoring 10/10 to the questions related to cleanliness, and professionalism with overall experience remaining stable at the peak level achieved in 2015.

4 of the 8 questions have seen the same or increased numbers scoring 10/10 and 4 reduced however, with 88% of all questions scoring 10/10 and 95% scoring 9 or 10 out of 10, it is difficult to draw any real conclusions around the individual subjects from this.
2 units obtained an individual top box score of 95% meeting the strategic target. A total of 43 questions out of 880 were scored less than 9 with only 13 scores less than 8 giving a top box score for all questions of 95%.

Question 8 “likeliness to recommend” which equates to the Family and Friends test achieved a top box score 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 93% score for the Top box question (Q7) and 95% for the Friends and Family Test question (Q8) indicates a continued high level of satisfaction with the service provided by TAS.

The notably lower percentage of surveys returned in Liverpool is likely to be a result of the high percentage of acute procedures undertaken offsite and relatively lower levels of outpatient work undertaken in the unit itself. This is also likely to account for the higher level of non returns seen in Liverpool.

The relatively low level of surveys issued in the Oxford unit needs further investigation. This may suggest that staff did follow instruction on the issue of surveys and facilitation of their return. It may also indicate that surveys were not issued to patients treated offsite.

Instructions given to the units, as a result of action recommended following the last survey, regarding the issue, facilitation of completion and return of the surveys appears to have had a significant impact with much higher issue and return rates this time.

Some comments appear to be very specific to individual patients and individual procedures/visits. Q8 specifically, which attracted the highest number of the lowest score, appears to be either confusing or irritating some patients evident from the comments related to this question. Some specific comments around infection prevention and control (IPC) and blood test results require investigation.

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 recieved 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, low numbers of patients and surveys involved 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 continues to yield some tangible suggestions for change 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 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 2017)*

**Action:** TAS Lead Nurses to ensure discussion of results and formation of action plans to address any changes identified from the survey results. *(July 2017)*

**Actions:** Lead Nurse in specific units identified in comments related to IPC, blood test results and waiting for machines to review and address these areas specifically with action plan *(July 2017)*

2. The recommendation around development of a questionnaire for use specifically with children to measure their experience (action deferred from the previous survey) to be prioritised now that GOSH team are more established.

**Action:** TAS Lead Nurse and staff in Great Ormond Street to lead on development of suitable child friendly questionnaire(s) for use in November 2017. *(September 2017)*

3. Results of the 2016 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 arrange dissemination of survey report to all relevant internal departments *(April 2017)*

**Action:** TAS Lead Nurses to disseminated survey report to all unit staff *(April 2017)*

**Action:** Business Support Manager to arrange for survey results to be placed on internal and external websites and distributed to relevant external stakeholders *(April 2017)*

4. Action should be taken to provide feedback on changes and improvements made as a result of findings, comments and suggestions in the survey.

**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 and on external websites. *(July 2017)*

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 *(May 2017)*
Appendix 1 - Patient Experience Survey Questionnaire

Please Tell us About your Experience

We hope that your Apheresis procedure went well.

Please help us to improve our service by taking a few moments to complete this short feedback form.

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 will remain 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
- Red Cell Exchange
- Photopheresis
- Lipid (Cholesterol) Removal
- Other ...........................................Please Specify

Your Procedure

How Many procedures have you had?
- 1st visit
- Between 1-5
- Between 6-10
- More than 10 - Ongoing treatment

Please give the specific details or examples in the comments boxes.

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

Your feedback is very important in helping us identify how we can improve any aspects of our service and the care our patients and their families receive during their visit.

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

How Can we Improve?

Your Visit

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

How could we do better?

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

How could we have involved you more?

4. How satisfied were you with the information you receive?

How could we improve the information we give you?
6. How happy were you with the cleanliness of our unit and staff?  

What could we do better?

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

How could we improve?

7. Please rate your overall experience of our service

Comments

8. How likely would you be would you be to recommend.

What else could we do to improve your experience?

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

Patient Experience Survey

Your feedback is important to us.
## Appendix 2 – Details of Survey Qualitative Data

<table>
<thead>
<tr>
<th>Q1 - Comment / Improvement</th>
<th>Q3 - Comment / Improvement</th>
</tr>
</thead>
</table>
| The team are very welcoming & happy, difficult to say how they can improve!  
You can't improve perfection  
Nothing to comment on  
Painkillers before anaesthetic wears off  
Very busy day in unit lots going on. A but overwhelming. Would be nice to be taken into area and procedure explained equipment etc unable to take information. This was on first visit not a problem now.  
Is fine as it is  
You cannot improve the team are very friendly  
No need good as it is  
Very welcoming  
Any problems will be ironed out as the staff do more plasma exchanges  
no improvement needed  
No need excellent  
Difficult timing and waiting for machine  
No improvement needed  
??? I dont need welcoming, Im in here for a medical procedure  
The staff are excellent, a credit to NHS  
smiling happy faces  
Provide a waiting area for early arrivals  
I always feel welcome  
I was made very welcome offered drinks and snacks during the procedure  
Staff are lovely, no improvement necessary  
Already very good  
Very friendly and informative staff | I'm always consulted.  
Can't think of anything  
Very satisfied. Staff take on board that I have a difficult skiing problem and always go the extra to make removal of cannula plasters etc.  
I'm very involved!  
you didn't have a choice  
kept informed at all stages of treatment by staff  
Perfect  
See above. Redundant and non sensical procedures are followed regardless of any other factors.  
I have always been well informed about my treatment |

<table>
<thead>
<tr>
<th>Q2 - Comment / Improvement</th>
<th>Q4 - Comment / Improvement</th>
</tr>
</thead>
</table>
| A very attentive team, I really don't think they could improve on my care & support  
All as it should be  
Extremely satisfied with care. It's good to see medication fluids injections are always checked by 2nd person.  
The care + support is very good and cannot be bettered  
Staff very caring  
no your great  
All staff involved have been very helpful and extremely pleasant  
No need excellent  
Staff dependent. Some very friendly and chatty.  
Perfect | Sometimes blood results seem to 'get lost' in the ether or tests not done. Maybe because its a rare lymphoma & tests are specific.  
Information given was just right  
I was cautious as to some elements of the procedure - was perfectly happy/not worried, however  
The written information is very wordy. A one page summary with diagram would be useful.  
Always can improve nobody is perfect  
you can't  
all staff were able to answer any questions about treatment we asked them excellent and answered questions very well to my liking |
<table>
<thead>
<tr>
<th>Q5 - Comment / improvement</th>
<th>Q6 - Comment / improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stop inventing additional busy work procedures which exist solely to be performed.</td>
<td>Was some confusion over effect of the plasma exchange on other drugs</td>
</tr>
<tr>
<td>I believe the staff are always at their best</td>
<td>Perfect</td>
</tr>
<tr>
<td>The staff would not have been more kind &amp; caring</td>
<td>The information has always been given</td>
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<td>You honestly couldn't</td>
<td>Very helpful and now we fully understand the treatment</td>
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<td>Updates of statistics/latest</td>
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<td>Keep up the current standard although there is always room for improvement</td>
<td>They have a fantastic mix of professionalism &amp; treating me like a friend—hard to do</td>
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<td>What can I say spotless. Staff always fresh and uniforms clean and tidy</td>
<td>but they all seem to manage it.</td>
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<td>Unit was very clean anyway</td>
<td>As Above</td>
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<td>Obvious the staff would always do better</td>
<td>Staff always very professional and caring. Work well together</td>
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<td>you can't improve on perfection</td>
<td>Very professional</td>
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<tr>
<td>On ward</td>
<td>It is sometimes difficult not to cough</td>
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<td>Perfect</td>
<td>All staff are very professional in their work. Carry on in same manner</td>
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<tr>
<td>The staff are a credit to the NHS and the units are always clean</td>
<td>Perfect</td>
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<tr>
<td>Very Clean</td>
<td>Remember that the job is patient care and not board room lecturer. Stop</td>
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<td>procedures where possible, listen to patients, allow more staff autonomy.</td>
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<td>Always the utmost professionals</td>
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<td>You couldn't—they were exceptional</td>
<td>Very kind, helpful and caring</td>
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<td></td>
<td>Very Professional</td>
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<td></td>
<td>Lots of explanations, genuine interests! Lovely!</td>
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<td>Nothing needs improving the staff is very professional</td>
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<td>Staff 10/10. Thank you. (Thumbs up, smiley face)</td>
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**Q7 - Comment / improvement**

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<tr>
<th>Comments</th>
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<tr>
<td>I've been having treatment for 2 1/2 years now &amp; I've seen nurses leave &amp; new ones join but the experience has always been excellent - even when my veins decide to play up! Just a TV needed Amazing As above Amazing staff Carry on doing what your doing Overall it is a good experience for what is a necessary and tedious procedure. A happy dedicated team who cared about not just my husband but also my welfare. Interaction between the team was excellent and supportive. Excellent service. All staff are kind, caring to ensure you are comfortable and happy The staff were lovely, made me feel very relaxed. Thank you. Excellent service Friendly, welcoming, informative and attentive. Excellent unit. You guys are awesome I think it is quite good and some people only have Excellent. Staff great - really informative and supportive. Very impressive. All the staff continue to keep us informed and support us in any way they can. Excellent work All staff involved have taken excellent care of not just me but my family members also and made it so much more relaxed experience Generally very good, staff knowledgeable Perfect staff, very friendly and informative I'm alive, you must be doing enough correctly that the above complaints are fairly meaningless. Excellent The staff are all lovely, it makes my daughter very settled really nice and friendly Always very good Very Good - Staff were excellent but the pump and filter let the side down First class Many thanks great service Everyone helpful and caring Everyone was so friendly and made me feel at ease Brilliant as good as I can imagine thanx Service was fantastic. Only negative was the regular squeezes I had to do with fist to help machine. Exhausted me could not relax. A very pleasant experience with very professional, friendly, and knowledgeable staff. Thank you</td>
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<td>Wouldn't want any to have to have it. Most definitely a professional team in Bristol - at least that's what I see as a patient. If they are having difficulties, I never see them &amp; in such a small area, I'm sure I would. It's life changing (silly question) Hope nobody I know needs the stem cell collection! I wouldn't &quot;recommend&quot; to anyone - fundamentally it's not enjoyable, but that's not your fault! As we live some distance away we would be very happy to explain unit to other patient if they have to travel to Bristol. Explain hotel, travel, etc. Not sure &quot;recommend&quot; is the right word. Would say that if someone had to attend unit then their experience would be very good Superb service, what would we do without teams such as yours - grateful to you all. Thank you. Extremely. Such a relaxing and calming environment. Staff very welcoming and accommodating. I am very pleased to come under the care of TAS team. Very friendly Excellent service and care from everyone always clean, friendly. I am very happy with the care I receive on a weekly basis Good on everything BLANK I would be quite hard to not cough but it would be still very interesting I would highly recommend this team and hospital to anyone who needed their services very good indeed done what was required Trick question. Would not recommend the illness in first place. Given illness, not really a choice. Not sure I would recommend the treatment but definitely the team This makes no sense! Recommend your service as opposed to...? To what? To some other nhs service, to an office in China? I have only the utmost praise for the nursing staff on this unit A great team spirit exists in the department and all the team members are friendly Very high. Staff are amazing and very helpful. Nothing is too much always willing to help. Excellent team work, Real care &amp; treatment &amp; follow up at all time for patient I shall be recruiting everyone for this! I would definitely recommend your service. I was a little anxious but immediately put at ease Would recommend to anyone Fantastic from Start to finish. Friendly, professional staff. Thank you! All staff is very kind and helpful. Very professional nurses The best - Thanks again. Facilities 10/10. Staff 10/10.</td>
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<td>General Comments Question</td>
<td>What else could improve the experience?</td>
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<td>Only to ensure blood test results are provided. Too many sezyary test either 'disappear' or never find a way onto my records which is disappointing. It's already awesome. Keep doing what you do. Many thanks for all your help. More staff so that there is a one-to-one experience. I saw nothing in the care and support if my husband that could have been improved. Constant hand washing - exceptionally clean environment - excellent. Infection control is vital in the treatment. A CPD on infection control might be required. My experience is quite unbelievable I have never had time off my work so I think would be ... Nothing. My experience was excellent and done the job very well. No more flaky skin or itching and clear skin. Thank you all. Although most treatment &quot;is now&quot; more local - as an outpatient it would be better if major hospitals were ALL equipped for outpatient treatment. The only thing was time/boredom, so possibly a radio or TV would pass time easier. Nothing at all, great the way it is. See previous comments. Professional and friendly. I can't see how the service can be improved. Can't thing of anything. Can't fault it. Keep doing what you are doing as excellent care.</td>
<td>Provide headphones for patients watching TV so that their enjoyment does not spoil things for others. This unit is like a ray of sunshine unlike elsewhere in the hospital - no one could direct us. If the machine has an alarm to let staff know when buffy coat has been reached. Nothing to add all aspects were very good. Very cold in ward, could be warmer. You would struggle to improve the service. The nurses were brilliant with me and I couldn't be happier with my time donating stem cells. Only thing sometimes you have bit of waiting around. All staff on this day were extremely pleasant and made my time very comfortable and made every effort to ensure I was comfortable. All the TAS team were cheerful, professional and informative. I am very grateful. Thank you. Thanx for the essential heat pack. I find the cold the most challenging bit! :) (I know the machine needs its own cool environment) Bye! A slightly larger room as I could see when patients arrived. It was a little congested for staff to move. In particular 1x table dangerous, wobbly leg. Have a service for the North of Sheffield. The standard is so high I don't think you could improve it. Quote &quot;Broghan age 8 filled this out&quot; Snack/drink provision inconsistent. I am very happy with my whole experience at Manchester Royal. All staff are very Nothing it is perfect. It's good as it is.</td>
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