

Therapeutic Apheresis Services User Satisfaction Survey 2019



Caring Expert Quality

Executive Summary

Therapeutic Apheresis Services (TAS) forms part of NHS Blood & Transplant's (NHSBT) Diagnostic and Therapeutic Services (DTS) directorate. TAS delivers services to adults and children from a range of clinical specialties in Trusts across eight regions.

This report presents the outcome of a User Satisfaction Survey (USS) sent to referring clinicians over a four-week period in March/ April 2019. A total of 358 surveys were issued with 83 returned, reflecting an overall response rate of 23%. Response rates ranged from 18% to 67% across the eight TAS units.

Feedback from the survey was assessed using top box scores (the percentage of answers scoring 9 or 10 out of 10) and average scoring methods as in previous surveys. The top box score for overall satisfaction (Q7) in 2019 is 75% with an average score of 9.0 and a range of 5-10.

Overall feedback is very positive, indicating a high level of satisfaction from TAS users with Quality of Nursing Service (Q4a) and Quality of Medical advice (Q4b) both receiving their highest ever scores of 84% and 81% respectively.

Three of the four areas identified in the 2018 USS as requiring improvement, all reported an improved score in 2019.

Table 1 shows the percentage increase in top box scores for the areas identified as requiring improvement in the 2018 survey report

Areas identified for improvement (2018)	2018 result	2019 result	% increase
Suitability of referral forms	47%	62%	15%
Availability of referral forms	52%	60%	8%
Clarity of the referral process	53%	58%	5%

Areas identified for improvement (those scoring <60%) are Q3, Clarity of the referral process (58%), Q5a. Quality of discharge communication (57%) and Q5b. Collaborative approach (53%). This has been a recurring theme across previous surveys and as a result, this year TAS will be introducing an electronic referral process to make referrals quicker and easier. We are also developing a clinical data base which will capture clinical information and produce discharge reports with anticipated implementation expected within twelve months.

A low response rate to the survey of 23% (83/358) has highlighted the need to explore alternative ways in which to better engage with referring clinicians to get their feedback; this will be an area prioritised for future development.

Range of Scores

Table 3 shows the top box, average and range of scores by question

Q	Question Abbreviation	Top Box Score	Average Score	Range
1	Range of services	79%	9.1	5 - 10
2	Quality of services	77%	9.0	4 - 10
3a	Clarity of referral process	58%	8.5	1 - 10
3b	Availability of referral forms	60%	8.5	4 - 10
3c	Suitability of referral forms	62%	8.5	1 - 10
3d	Timeliness of response to referrals	74%	9.0	5 - 10
3e	Speed which treatment is provided	75%	8.9	1 - 10
4a	Quality of service from nursing team	84%	9.3	5 - 10
4b	Quality of advice from medical team	81%	9.1	5 - 10
5a	Quality of discharge communications	57%	8.2	1 - 10
5b	Collaborative approach of ongoing treatment	55%	8.1	1 - 10
6	Management of complaints	73%	8.6	5 - 10
7	Overall satisfaction	75%	9.0	5 - 10
8	Likelihood to recommend	79%	9.2	5 - 10

Overall feedback from users is very positive, with direct patient facing activity in Q4a. Quality of Nursing Service receiving a high average score of 9.3. Q1. Range of services, Q2. Quality of Services, Q3d. Timeliness of response to referrals, Q3e. Speed of Treatment and Q4b. Quality of Medical advice all received average scores of 9 and above.

Areas identified for improvement (those scoring <60%) are Q3a, Clarity of the referral process (58%), Q5a. Quality of discharge communication (57%) and Q5b. Collaborative approach (53%). As highlighted in the Executive Summary this year TAS will be introducing 2 new key developments

1. An electronic referral process to make referrals quicker and easier
2. A clinical data base, which will capture clinical information and produce discharge reports

Anticipated implementation of both developments is expected within the next twelve months.

Chart 1 shows the top box and average score by question

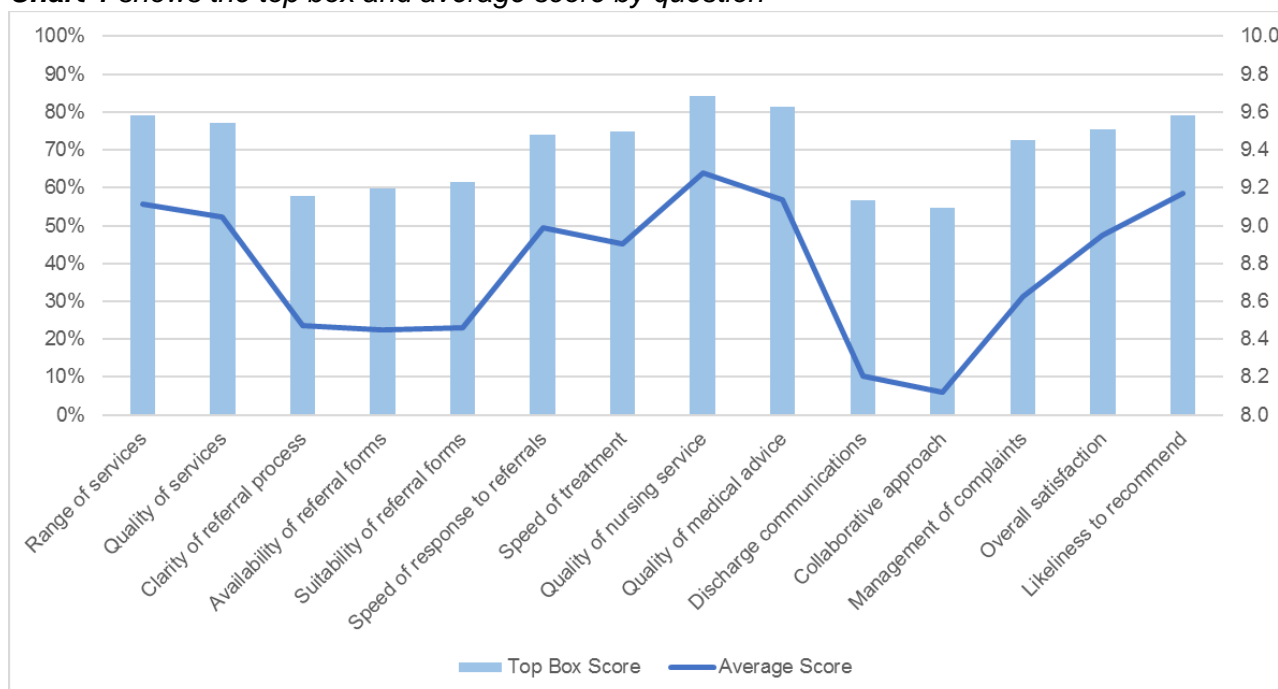


Table 4 shows the top box, average and range of scores for overall satisfaction by unit for the last three surveys

Unit	Surveys Returned	Top Box			Average			Range		
		2017	2018	2019	2017	2018	2019	2017	2018	2019
Birmingham	67%	100%	0%	25%	9.0	8.0	7.3	9-9	8 - 8	5 - 9
Bristol	23%	58%	58%	69%	9.1	8.7	8.7	8-10	6 - 10	5 - 10
Leeds	26%	73%	75%	90%	9.0	9.1	9.3	7-10	7 - 10	7 - 10
Liverpool	22%	76%	80%	80%	9.3	9.2	9.1	7-10	6 - 10	8 - 10
London	18%	100%	75%	63%	9.3	9.3	9.0	9-10	7 - 10	8 - 10
Manchester	20%	0%	100%	67%	7.7	9.2	8.8	7-8	9 - 10	8 - 10
Oxford	23%	67%	63%	83%	8.8	8.9	9.2	5-10	8 - 10	7 - 10
Sheffield	21%	100%	86%	80%	9.5	9.4	9.0	9-10	8 - 10	8 - 10

There is a varied response rate across the TAS units with 18% (8/45) received from London referring clinicians compared to 67% (4/6) of clinicians referring to TAS Birmingham.

Response rates to the USS have seen a general decline over the last few years and this would appear to be an indication from users that the current process of collecting feedback via survey on an annual basis is not optimum.

Table 5 shows the top box, average and range of scores by question for the last four surveys with areas to focus on improving in 2019 identified in yellow (those with a top box score of <60%)

Question Abbreviation	Ques. No.	Top Box Scores				Average Score				Range			
		2016	2017	2018	2019	2016	2017	2018	2019	2016	2017	2018	2019
Services - range	1	65%	71%	77%	79%	8.6	9.0	9.1	9.1	5-10	5-10	5-10	5-10
Services - quality	2	70%	70%	78%	77%	8.8	9.0	9.1	9.0	3-10	2-10	5-10	4-10
Clarity of referral process	3a	38%	47%	53%	58%	7.9	8.2	8.5	8.5	4-10	3-10	1-10	1-10
Availability of referral forms	3b	38%	45%	52%	60%	7.9	8.0	8.3	8.5	2-10	4-10	5-10	4-10
Suitability of referral forms	3c	38%	44%	47%	62%	7.8	7.9	8.3	8.5	1-10	2-10	4-10	1-10
Timeliness of response to referrals	3d	57%	70%	78%	74%	8.4	9.1	9.1	9.0	5-10	7-10	4-10	5-10
Speed of treatment	3e	61%	75%	72%	75%	8.5	9.0	9.0	8.9	3-10	2-10	5-10	1-10
Quality of service delivery	4a	75%	80%	79%	84%	9.0	9.2	9.3	9.3	3-10	4-10	6-10	5-10
Quality of clinical advice	4b	70%	70%	77%	81%	9.0	8.9	9.2	9.1	5-10	2-10	6-10	5-10
Quality of discharge comms	5a	44%	53%	58%	57%	8.3	8.6	8.5	8.2	4-10	4-10	1-10	1-10
Collaborative approach	5b	54%	62%	66%	55%	8.4	8.6	8.7	8.1	3-10	2-10	2-10	1-10
Complaint management	6	50%	68%	70%	73%	8.5	8.9	8.9	8.6	4-10	5-10	1-10	5-10
Overall satisfaction	7	62%	70%	74%	75%	8.7	9.0	9.1	9.0	3-10	3-10	6-10	5-10
Likelihood to recommend	8	75%	79%	86%	79%	8.9	9.2	9.4	9.2	4-10	3-10	6-10	5-10

Table 6 shows comments received from users to both Q3 (the referral process) and Q5 (the discharge communication)

Question 3 – Referral Process
The referral process could be better if there was an electronic referral process which is linked to EPR as the forms are not easy to find and complete.
Accessing referral forms/ contacts could be made easier, but once contact made service excellent
Question 5 – Discharge Communications & Collaborative Approach to Ongoing Treatment
No communication when the patients have had a procedure
Good collaborative approach regarding ongoing treatment, but do not recall a discharge summary from TAS
Limited information provided but does not need to be extensive.
Don't think I've ever received a discharge summary and the one patient I have on long term PEX I very rarely get any info on and have to rely on the patient to tell me how often she's having the procedure.

Key development areas identified for action:

- Each TAS unit to receive unit specific data following publication of the USS main report. An action plan to improve on any relevant scores < 60% will be developed incorporating feedback from referring clinicians to further enhance localised partnership working. This should be progressed and monitored at the local TAS Clinical Governance Group meetings.
- Based on the low 23% response rate from users, the development of TAS unit specific user group meetings will be progressed as a priority to ensure that local feedback is sought directly from users in a more regular/ timely manner.

Next Steps:

Action	By Whom	Timeframe
Distribute the USS to all key internal and external stakeholders and share the report widely.	TAS Administrator	Jun-19
Senior Management team (SMT) to acknowledge the repeating areas of key concern from users on the last two User Satisfaction Surveys are that of the Referral and Discharge process and send out a communicate updating on the progress of both an electronic referral system and a clinical database.	Service Development Manager (SDM) on behalf of TAS SMT	Jun-19
Each unit to receive comprehensive feedback on their individual reports and develop bespoke action plans to address local concerns. Review of progress with the action plan will fall into a business as usual review of TAS activity and be monitored by Senior Nurse Managers.	Data Analyst and Senior Nurse Managers (SNMs)	Jun-19
SDM to work with the Operational management team to ensure each TAS unit has a model for gaining user feedback / satisfaction via a regular user group forum.	SDM, SNMs and Head of Operations	Oct-19

We would like to thank all clinicians that responded to the survey, your feedback is invaluable in helping to steer the future direction of Therapeutic Apheresis Services.

Elaine Howe – Service Development Manager
Olivia Pirret – Data Analyst Administrator

NHS Blood & Transplant

NHS Blood & Transplant (NHSBT) saves and improves lives by providing a safe, reliable and efficient supply of blood and associated services to the NHS in England. We are the organ donor organisation for the UK and are responsible for matching and allocating donated organs.

We rely on thousands of members of the public who voluntarily donate their blood, organs, tissues and stem cells. Their generosity means each year we're able to supply around 1.9 million units of blood to hospitals in England and around 4,200 organ and 5,800 tissue donations, which save or improve thousands of lives.

For more information about the User Satisfaction Survey or Therapeutic Apheresis Services

Email TherapeuticApheresisServices@nhsbt.nhs.uk

Call 0117 921 7407

Therapeutic Apheresis Services Service User Satisfaction Survey March 2019

NHS Blood and Transplant's Therapeutic Apheresis Services function provides therapeutic apheresis services to NHS Trusts from eight units across England. The main therapies provided are:

- Extracorporeal Photopheresis
- Therapeutic Plasma Exchange
- Peripheral Blood Stem Cell Collection
- Automated Red Cell Exchange
- Low Density Lipid Removal

Our unit staff strive to provide high quality services, and to help ensure we achieve this we regularly seek feedback from both our service users and patients.

As a referring clinician your feedback is very important to help inform how we shape the development and delivery of our services in the future.

We would be very grateful if you could spare the time to complete this short survey and return it in the freepost envelope provided by Sunday 31st March 2019.

Name:
Role:
Trust:
Hospital:
Telephone contact:
Email Address:

Please indicate your area of specialism:

Haematology		Renal		Neurology		Cardiology		Oncology		Dermatology	
Other (Please Specify)											

Adult Services	Paediatric Services	
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For more information on Therapeutic Apheresis Services, please visit our hospitals webpages at:
<http://hospital.blood.co.uk/patient-services/therapeutic-apheresis-services/>

Or alternatively, our patient webpages at:
<http://www.nhsbt.nhs.uk/what-we-do/therapeutic-apheresis-services/>



1.

	Totally Dissatisfied										Totally Satisfied										
	☹										☺										
How satisfied are you with the range of services available from Therapeutic Apheresis Services?	N/A	1	2	3	4	5	6	7	8	9	10										

Comments

2.

	Totally Dissatisfied										Totally Satisfied										
	☹										☺										
How satisfied are you with the quality of the services available from Therapeutic Apheresis Services?	N/A	1	2	3	4	5	6	7	8	9	10										

Comments

3. Please rate your satisfaction with our patient referral process:

	Totally Dissatisfied										Totally Satisfied										
	☹										☺										
a. Clarity of process	N/A	1	2	3	4	5	6	7	8	9	10										
b. Availability of referral forms	N/A	1	2	3	4	5	6	7	8	9	10										
c. Suitability of referral forms	N/A	1	2	3	4	5	6	7	8	9	10										
d. Timeliness of our response to your referrals	N/A	1	2	3	4	5	6	7	8	9	10										
e. Speed with which the treatment is provided	N/A	1	2	3	4	5	6	7	8	9	10										

Comments

4. Please rate your satisfaction with the interactions you have with the Therapeutic Apheresis Services clinical team:

	Totally Dissatisfied										Totally Satisfied												
	☹										☺												
a. Quality of service delivery from our nursing team	N/A	1	2	3	4	5	6	7	8	9	10												
b. Quality of clinical advice from our medical team	N/A	1	2	3	4	5	6	7	8	9	10												

Comments

5. How satisfied are you with the discharge communications you receive, including:

	Totally Dissatisfied										Totally Satisfied												
	☹										☺												
a. Quality of information provided	N/A	1	2	3	4	5	6	7	8	9	10												
b. Collaborative approach regarding ongoing treatment	N/A	1	2	3	4	5	6	7	8	9	10												

Comments

6.

	Totally Dissatisfied										Totally Satisfied												
	☹										☺												
If applicable, how well have we met your expectations in the management of complaints and issue resolution?	N/A	1	2	3	4	5	6	7	8	9	10												



Comments

7.

	Totally Dissatisfied										Totally Satisfied												
	☹										☺												
How satisfied are you with the overall service provided by Therapeutic Apheresis Services?	N/A	1	2	3	4	5	6	7	8	9	10												

Comments

8.

Very unlikely  Very likely 

Thinking about your experiences as a service user, how likely are you to recommend use of our Therapeutic Apheresis Services to a colleague?	N/A	1	2	3	4	5	6	7	8	9	10

Comments

9. Please state what aspects of the Therapeutic Apheresis Services you most value.

10. Please state what aspects of the Therapeutic Apheresis Services, if any, you would like to see improved?

11. Are there any service development or improvement initiatives you are undertaking which might impact on the service you require from Therapeutic Apheresis Services in the future?

Would you like a member of the Therapeutic Apheresis Services team to contact you to discuss any aspects of the service we provide?

Yes

No

Thank you for taking the time to complete this survey.
Please return in the freepost envelope provided or alternatively to:
Therapeutic Apheresis Services Administration Team
Main Office, First Floor
NHS Blood and Transplant
500 North Bristol Park
Filton
Bristol
BS34 7QH