

Patient experience in acute care trusts: findings for inclusion in the 2023-2028 NHS South West London Joint Forward Plan

By Alyssa Chase-Vilchez (Executive Officer, SWL Healthwatch) with support from Nayan Tailor (Director of Programmes, SWL Acute Provider Collaborative)

Key findings

1. Across all of our hospital trusts, most of our patients were highly satisfied with staff's communication, professionalism and care.
2. Patients feel that they are treated with dignity and respect. Patients rate our hospitals particularly highly for providing privacy when being examined or treated, and for being included in the conversation when doctors had conversations about their care in their presence.
3. Patients sometimes described feeling lonely while in hospital. Some South West London trusts are addressing this through volunteer programmes that provide companionship and processes that allow inpatients to send letters to loved ones.
4. All four SWL acute care Trusts scored an average of 8.0 or higher¹ (indicating excellent care) on their assessment and management of pain. However, Trusts continue to receive complaints about pain management. As an example of good practice, Kingston Hospital has launched an initiative to improve pain identification and management among patients with dementia, recognising that these patients are not always able to express their pain.
5. South West London patients indicated moderate satisfaction for the length of time being on a waiting list before admission to hospital and for waiting for a bed on a ward after arriving at hospital. Patient concerns about wait times, particularly for a referral or to schedule an outpatient appointment, were raised, specifically for people living with diabetes and those with sight loss.

¹ 2021 National Inpatient Survey

6. Patients, their carers, and hospital staff expressed concerns about the process to discharge inpatients from the hospital and into home and/or community care. These concerns focused on **when** patients were discharged, with some feeling that patients were being discharged before their acute needs were satisfactorily addressed while others complained about delays in being able to return home. There are also numerous concerns about whether Trusts are adequately supporting patients in receiving the appropriate level of care when they leave the hospital. For example, carers often report that they are not provided with enough training and information to administer at-home care, and across all four Trusts, most patients indicated that they had not received clear instructions about how to take medications prescribed while in-hospital.² Discharge practices for people living with dementia were cited as particularly poor.

Limitation of findings

Please note that in general it was not possible to assess whether results from patient satisfaction surveys and consultation events differed by protected characteristics due to lack of reporting.

Annexes

Annex 1: Methodology

Annex 2: Table showing how data informed themes

Annex 3: Data supporting identified themes from reports

[Annex 4: 2021 National Inpatient Survey analysis](#)

Annex 5: References

² 2021 National Inpatient Survey

Methodology

1. Alyssa Chase-Vilchez (ACV) and Nayan Tailor (NT) worked together to agree a set of reports/other intelligence for consideration for inclusion in this analysis. These included:
 - Emailed feedback from Trust programme leads
 - SWL acute care Trust annual quality reports
 - SWL acute care Trust patient experience reports
 - Patient complaints and Patient Advice and Liaison Service data for one Trust
 - Healthwatch reports
 - Reports included to inform the draft Integrated Care Strategy
 - National patient surveys, where findings can be disaggregated by Trust or ICS.

2. ACV established the inclusion/exclusion criteria for extracting a given report's findings for inclusion in the analysis, which NT agreed. Not all report types listed above contained findings that met the inclusion criteria; patient complaints and patient advice and liaison service data were notably excluded.
 - Inclusion criteria: Patient views described, with some detail provided about the relative number of patients with these views; audit reports that use patient-centred outcomes. Reports could be qualitative or quantitative.
 - Exclusion criteria: Accounts of what Trusts or the ICS have done to improve patient experience; complaint data without sufficient detail to make specific recommendations; case studies or examples of a Trust's response to a complaint where it is unclear how common the experience is.

3. For all data except for national survey data, [Taguette](#), an open-source qualitative analysis tool, was used to categorise ('tag') findings that met the inclusion criteria into one or more relevant themes. These themes were identified prospectively.

4. Where information was available, comments were also grouped according to the Trust and/or borough from which the findings came, to help avoid assumptions about generalisations across all acute Trusts in SWL. In addition, it was assessed whether the patient engagement process included people with protected characteristics and whether the results might be reasonably assumed to be broadly applicable across SWL populations, or only relevant to certain groups.

5. As tags were added prospectively, at the conclusion of the first round of analysis, all comments were read again to make sure that they were appropriately tagged.
6. The number of times each tag was used was summed in order to identify the key themes that appeared across different patient engagement reports (Annex 2). This informed the selection of key findings for the SWL acute provider collaboratives.
7. Annex 4 describes how national survey data (2021 National Inpatient Survey Data) was analysed. This analysis was used to provide further evidence to support the findings.

Annex 2

Table showing how data informed themes

Themes	Pages with data	Frequency	Findings No.
Autism, disability (including dementia), frailty	6-8	6	4, 5, 6
Hospital discharge	9-11	4	6
Privacy, dignity, and emotional & physical wellbeing	11-13	4	2, 3
Hospital environment	13	2	Not included
Quality of treatment and care (primarily, but not exclusively, for pain)	14-15	4	4
Staff professionalism, communication, and competence	15-17	3	1
Wait times	17-19	6	5

*Evidence from 2021 National Inpatient Survey not included in these counts)

Annex 3

Data supporting identified themes from reports

Autism, disability (including dementia), frailty

The figure above depicts the PLACE audit compliance score: 100%
Cleanliness, 96%

Condition & Appearance, **93% Disability**, 88% Dementia, 87% Food and 70%
Privacy, Dignity & Wellbeing.

NHS Digital has now announced the PLACE programme will recommence in
September 2022

Document: Croydon Health Services NHS Trust (2022). *Quality Account
2021/22.*

Other tags: Croydon University Hospital, Hospital environment, Emotional and
physical wellbeing

An engagement on services for people with **sight loss** found some
respondents had long waits for appointments and experienced cancelled
appointments, including waiting times for the Moorfields clinic at St George's.
This was compounded by the time it takes to obtain a referral letter from the
GP, especially as there is a need for the referral process to be repeated if the
patient had not visited Moorfields clinic for more than six months.

Document: Healthwatch Wandsworth (2022) *Experiences of Health and
Social Care Services for People with Sight Loss*

Other tags: Moorfield clinic at St George's, Wait times

A recent Sutton stakeholder engagement on **frailty** made recommendations
for an improved discharge process. They suggested early identification of
patients with complex needs who would be suitable for a hub or virtual ward.
Additionally, they recommended consolidating or improving the in-reach into
wards as a support to discharge and to promote the VW, Complex Multi
Disciplinary Team and PCCH. The referral process for patients in acute
services due to be referred to community services should be simplified so they
do not have to access services via their GP or Primary Care Teams. This should

comprise concise informative discharge summaries from acute hospitals. Agreeing a process with adult social care would avoid delays. Discharges should be facilitated in the morning and utilise a discharge checklist in wards. The therapy team should be worked with more closely.

Document: South West London ICS (2022) *Report on the Sutton Frailty Engagement Event*

Other tags: Sutton, hospital discharge

Patient Experience			
Our quality priorities	What will success look like?	How did we do in 2021/22?	How our performance compared with 2020/21
We will undertake thematic analysis of our complaints to identify recurrent themes and share their findings	Reduction in the number of complaints when compared with the 2019/20 baseline (complaint numbers impacted in 2020/21 and 2021/22 due to the pandemic)	<p>We partially achieved this</p> <p>We undertook thematic analysis on a quarterly basis which identified recurrent themes: care and treatment; communication; and staff attitude</p> <p>When compared with 2019/20 and 2018/19, the total number of complaints was 1,044</p>	<p>The number of complaints received in previous years was as follows:</p> <ul style="list-style-type: none"> • 2020/21: 708* • 2019/20: 956 • 2018/19: 1101 <p>*Impacted by Covid-19</p>
Provide an equitable experience for patients from vulnerable groups	Improvement in our self-assessment against the National Learning Disability Standards having had the opportunity to make service improvements following the first self-assessment in 2020	<p>We partially achieved this</p> <p>The second self-assessment was completed against national standards for Learning Disability patients and at the time of writing we are awaiting the results</p> <p>The action plan to address improvements identified against 11/79 national standards did not progress as expected due to significant staffing shortages in the team</p>	<p>In March 2021 we received the results of the NHS benchmark assessment that was completed against national standards for Learning Disability patients.</p> <p>There were 107 national benchmark Learning Disability Standards, of which 79 benchmark standards applied to SGH.</p> <p>48/79 (61%) were in line with the national standard 20/79 (25%) were above the national standard 11/79 (14%) were below the national standard</p>

(See final column about learning disability assessment)

Document: St George's University Hospitals NHS Foundation Trust (2022). *Annual Reports and Accounts 2021/22.*

Other tags: St George

Merton and Wandsworth engaged on Improving support for people following hospital discharge and bedded rehab. The engagement found that people

were generally happy with the discharge process. About a third of responses said their needs were not met in hospital. Reasons ranged from lack of staff, poor communications and a feeling of being “rushed to be discharged.” A number of respondents said there was no appreciation for the needs for **dementia** patients. Half of these said their unmet needs were not picked up by community therapy providers. The majority of respondents said rehabilitation/therapy at home had helped with their recovery and were pleased with the service they received. Some of those who found the service did not help their recovery mentioned delayed services.

Document: NHS SWL (2022) *Improving support for people following hospital discharge and bedded rehab: NHS South West London engagement summary*

Other tags: Wandsworth, Merton, hospital discharge

Quality Priority for Improvement 1

Improve the way that pain is recognised, assessed, and managed for patients who have difficulties in expressing themselves.

Why we chose this Indicator (Background):

Pain is one of the most common symptoms that people with dementia experience.

However, often it is poorly recognised and undertreated in **dementia**. The main reason for this is that, as dementia progresses, the person's ability to communicate their needs becomes more difficult. The 2021 National Audit for Dementia found that for a cohort of 152 patients with either known dementia or concerns about their cognition, 14.1% had a pain assessment completed, below the national average of 16.4%.

Document: Kingston Hospital NHS Foundation Trust (2022). *Quality Account 2021-22*

Tags: Kingston Hospital, Quality of treatment and care

Hospital discharge

From 2021 National Inpatient Survey, all four Hospital Trusts scored poorly on: Q41 Were instructions about the medication you were to take at home communicated well?

Document: Care Quality Commission. *Adult inpatient survey 2021 benchmark reports.*

A patient's discharge summary is a vital document in providing clear information to internal and external care providers on their hospital encounter upon the transfer of the patient's care. Lack of clear information on the patient's stay can lead to significant safety issues arising if changes to their care and follow up actions for the GP are missed. Currently a proportion of patients treated at Kingston Hospital are discharged either without a discharge summary being sent to their GP, or a discharge summary containing incomplete information being sent. The average daily discharge summary completion as a proportion of total discharges was 70% in the Trust's A&E department over September 2021 and 87% across the inpatient wards in April 2021. Patients and healthcare professionals have told us that the format and content of existing discharge summaries does not always meet their needs.

Document: Kingston Hospital NHS Foundation Trust (2022). *Quality Account 2021-22*

Other tags: Kingston Hospital

A recent Sutton stakeholder engagement on **frailty** made recommendations for an **improved discharge process**. They suggested early identification of patients with complex needs who would be suitable for a hub or virtual ward. Additionally, they recommended consolidating or improving the in-reach into wards as a support to discharge and to promote the VW, Complex MDT and PCCH. The referral process for patients in acute services due to be referred to community services should be simplified so they do not have to access services via their GP or Primary Care Teams. This should comprise concise informative discharge summaries from acute hospitals. Agreeing a process with adult social care would avoid delays. Discharges should be facilitated in the morning and utilise a discharge checklist in wards. The therapy team should be worked with more closely.

Document: South West London ICS (2022) *Report on the Sutton Frailty Engagement Event*

Other tags: Sutton, Autism, disability (including dementia), frailty

Wandsworth Healthwatch conducted an in depth engagement to understand **carer's experience of hospital discharge**. The report had a series of findings and recommendations relating to identification of carers and their caring role, improved communication and information, timing of discharges and improved assessment of carer/caring needs post-discharge. Among other findings, the report highlighted that not all carers were identified. More experienced carers knew how to ask for support and work with care teams, but new carers found it more difficult 'to navigate the system' and required advice or guidance from someone in the hospital. Carers did not always feel their home situation was adequately assessed or appreciated, although physiotherapists were mentioned as being most likely to understand requirements. Often a patient's needs had increased after the hospital stay and this was not fully assessed. Not all carers had discussion with staff before discharge and the ability of carers was not always adequately assessed. Wandsworth Healthwatch recommend it should be standard practice for staff to check abilities of carers, including discussing with other family members where necessary. The engagement found that some care did not feel fully informed about how to look after their loved ones. Some did not have enough information about the care programme arranged by the hospital team. In particular, carers would like information about organisations that could help post discharge. Some experienced delays to discharges due to lack of coordination between hospital services. These included delayed medications, unavailability of discharge doctors and delays with preparing the discharge letter.

Document: South West London ICS (2022) *Report on the Sutton Frailty Engagement Event*; Healthwatch Wandsworth (2022) *Carer experience of hospital discharge*

Other tags: Wandsworth

Merton and Wandsworth engaged on **Improving support for people following hospital discharge and bedded rehab**. The engagement found that people were generally happy with the discharge process. About a third of responses said their needs were not met in hospital. Reasons ranged from lack of staff,

poor communications and a feeling of being “rushed to be discharged.” A number of respondents said there was no appreciation for the needs for dementia patients. Half of these said their unmet needs were not picked up by community therapy providers. The majority of respondents said rehabilitation/therapy at home had helped with their recovery and were pleased with the service they received. Some of those who found the service did not help their recovery mentioned delayed services.

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Other tags: Wandsworth, Merton, Autism, disability (including dementia), frailty

Privacy, dignity, and physical & emotional wellbeing

All four SWL acute care Trusts scored very well on the following indicators relevant to this theme on the 2021 National Inpatient Survey:

Q15 During your time in hospital, did you get enough to drink?

Q28 Were you given enough privacy when being examined or treated?

Q47 Overall, did you feel you were treated with respect and dignity while you were in the hospital?

Document: Care Quality Commission. *Adult inpatient survey 2021 benchmark reports.*

The figure above depicts the PLACE audit compliance score: 100% Cleanliness, 96% Condition & Appearance, 93% Disability, 88% Dementia, 87% Food and 70% Privacy, Dignity & Wellbeing.

NHS Digital has now announced the PLACE programme will recommence in September 2022

Document: Croydon Health Services NHS Trust (2022). *Quality Account 2021/22*

Other tags: Croydon University Hospital, Hospital environment, Autism, disability (including dementia), frailty

The Trust launched its Letters For Loved Ones (LFLO) service on 8 April 2020. Using an email box, its purpose was to enable relatives and friends to keep in touch with inpatients during the suspension of visiting due to the COVID-19 pandemic. The

initiative proved to be immensely successful. User feedback frequently described it as a 'lifeline'. Indeed, several users enquired about making a donation to the Trust as a mark of their profound gratitude.

Document: Epsom and St Helier University Hospitals NS Trust; Sutton Health & Care; Surrey Downs Health & Care (2021) Epsom and St Helier Patient Experience Annual Report 2020-2021.

Other tags: Epsom and St Helier

Over the last year, we received 23,614 comments from patients and families who experienced treatment within planned care (this includes children and adults).

91% of all feedback related to the following 4 themes:

- Professionalism and competence of staff
- **Emotional and physical support, friendliness, compassion and communication**
- Quality of treatment and care
- Waiting

The first 3 were over 90% positive on average.

Document: ICB feedback for Planned Care: April 2022 to March 2023; FFT (Friends and Family Test) general themes. Author unknown (provided by Nayan Tailor for analysis). (2022).

Other tags: Staff professionalism, communication, and competence, Quality of treatment and care, Place unspecified

From our internal research: Our patients have told us that they don't feel they can easily find their way around and, on the wards, can get lonely. As such, our volunteer services are under a heavy recruitment campaign to recruit our volunteer fleet up to pre-pandemic levels so that we can get more comprehensive helpers on wards and to help direct people around the trust. This projected to produce 100 additional volunteers to our fleet by the end of this calendar year. Additionally, our chaplaincy service has 7 volunteers that provide ward level pastoral support for patients who require assistance in eating or keeping themselves busy with very positive feedback provided to chaplaincy from the families of the patients involved.

Document: Croydon Health Services NHS Trust (2023). Personal communication.

Other tags: Croydon University Hospital

Hospital environment

All four SWL acute care Trusts scored very well on the following indicators relevant to this theme on the 2021 National Inpatient Survey:

Q8 How clean was the hospital room or ward that you were in?

Document: Care Quality Commission. *Adult inpatient survey 2021 benchmark reports.*

The figure above depicts the PLACE audit compliance score: 100% Cleanliness, **96%**

Condition & Appearance, 93% Disability, 88% Dementia, 87% Food and 70% Privacy, Dignity & Wellbeing.

It received 100% score for cleanliness.

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Document: Croydon Health Services NHS Trust (2022). *Quality Account 2021/22*

Other tags: Croydon University Hospital, Privacy, dignity, and physical & emotional wellbeing, Autism, disability (including dementia), frailty

Although small in number (less than 1% of feedback), there were a few themes in which more than half of our patients did not rate highly. These are:

- Pain – not fully acknowledged or not treated successfully
- **Parking – lack of space at the hospital**
- **Other aspects of our facilities**

Document: ICB feedback for planned care March 2023

Other tags: Quality of treatment and care, Place unspecified

Quality of treatment and care (especially, but not exclusively, for pain)

All four SWL acute care Trusts scored very well on the following indicators relevant to this theme on the 2021 National Inpatient Survey:

Q29 Do you think the hospital staff did everything they could to help control your pain?

Document: Care Quality Commission. *Adult inpatient survey 2021 benchmark reports.*

Overall, non-clinical service quality generated the least positive comments, although only 0.4% of feedback was in this category. Patients referred to issues such as uncomfortable chairs, unreliable Wi-Fi, or over-crowded waiting areas.

Document: ICB feedback for planned care March 2023

Tags: Place unspecified

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Document: ICB feedback for planned care March 2023

Other tags: Staff professionalism, communication, and competence, unspecified, Privacy, dignity, and physical & emotional wellbeing

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Document: ICB feedback for planned care March 2023

Tags: Hospital environment, Place unspecified

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Document: Kingston Hospital NHS Foundation Trust (2022). *Quality Account 2021-22*

Tags: Kingston Hospital, Autism, disability (including dementia), frailty

Staff professionalism, communication, and competence

All four SWL acute care Trusts scored very well on the following indicators relevant to this theme on the 2021 National Inpatient Survey:

Q16 When you asked doctors questions, did you get answers you could understand?

Q17 Did you have confidence and trust in the doctors treating you?

Q18 When doctors spoke about your care in front of you, were you included in the conversation?

Q20 Did you have confidence and trust in the nurses treating you?

Q25 How much information about your condition or treatment was given to you?

Q32 Beforehand, how well did hospital staff answer your questions about the operations or procedures?
Q47 Overall, did you feel you were treated with respect and dignity while you were in the hospital?

Document: Care Quality Commission. *Adult inpatient survey 2021 benchmark reports.*

Over the last year, we received 23,614 comments from patients and families who experienced treatment within planned care (this includes children and adults).

91% of all feedback related to the following 4 themes:

- **Professionalism and competence of staff**
- Emotional and physical support, friendliness, compassion and communication
- Quality of treatment and care
- Waiting

The first 3 were over 90% positive on average.

Document: ICB feedback for planned care March 2023

Other tags: Privacy, dignity, and emotional & physical wellbeing, Quality of treatment and care, Place unspecified

• **Quality Priority for Improvement 2**

To improve staff's capability to communicate compassionately and effectively with our patients, their families, and carers and to address their concerns at the earliest opportunity.

Why we chose this Indicator (Background):

Complaints and concerns often can be resolved immediately if the staff member dealing with the issue is confident on how to handle complaints. There have been past instances of formal complaints arising at Kingston

Hospital after opportunities to de-escalate the situation were missed. Avoidable escalation of issues leads to a poorer experience for patients and their families, as well as diverting time and efforts of staff to the process of dealing with a formal complaint.

Document: Kingston Hospital NHS Foundation Trust (2022). *Quality Account 2021-22*

Other tags: Kingston Hospital

Themes

In terms of what the patients and relatives said about the care they experienced with us, these were the top five 'themes' for 2020-2021:

Theme	% of all themes
1. Staff kind and caring	15.8%
2. Staff/care amazing, brilliant, fantastic etc.	15.8%
3. Staff hard-working and dedicated	14.3%
4. Staff reassuring and calming	8.5%
5. Staff friendly, welcoming, polite and upbeat	8.3%

These themes, particularly the third one, assuredly reflected the demeanour of our staff during the 'COVID-19' year.

Document: Epsom and St Helier University Hospitals NS Trust; Sutton Health & Care; Surrey Downs Health & Care (2021) Epsom and St Helier Patient Experience Annual Report 2020-2021.

Other tags: Epsom and St Helier

Wait times

34% of comments which mentioned **waiting** were negative. These covered a range of issues such as delays, cancellations and queueing. In the majority of cases, there was at least one other significant trigger for poor feedback; **multiple factors including a long wait** generates a poor experience overall. The majority of patients who experienced a long wait, gave a positive score because of the high value they attributed to good communication, compassion and professionalism.

Examples of problems with waiting:

"Waiting for more than 4 hours is too much."

“My first time at Kingston hospital. Terrible experience waiting for prescription at outpatients boots pharmacy. If not for this would have ticked very good to describe experience in glaucoma clinic.”

Document: ICB feedback for planned care March 2023

Other tags: Place unspecified

The bar chart highlights varied waiting times for different services. For instance, 78% of people booking a GP appointment managed to get one on the same day (25 out of 32 responses). Similarly, 75% of people booking an appointment with a practice nurse got an appointment on the same day.

Hospital appointments had longer waiting times with everyone who gave feedback about an appointment at St George’s Hospital (4 people), waiting more than a month or their appointment had been booked prior to lockdown.

This correlated with satisfaction levels, most respondents were happy overall with this experience. For example, 85% (78 of 92 respondents) considered this was a reasonable amount of time to wait for an appointment. Several mentioned that the time to wait for an appointment was significantly less than pre-COVID, “It was straightforward and seemed like I got an appointment much closer to the day I phoned than I would have done pre-COVID (before I have had to wait up to 3 weeks for an appointment!)”

Document: Healthwatch Wandsworth (2021) *Experiences of digital and telephone appointments*

Other tags: St George

An engagement on services for people with **sight loss** found some respondents had long waits for appointments and experienced cancelled appointments, including waiting times for the Moorfields clinic at St George’s. This was compounded by the time it takes to obtain a referral letter from the GP, especially as there is a need for the referral process to be repeated if the patient had not visited Moorfields clinic for more than six months.

Document: Healthwatch Wandsworth (2022) *Experiences of Health and Social Care Services for People with Sight Loss*

Other tags: Autism, disability (including dementia), frailty St George

A Healthwatch Kingston report mentioned good services for people with **diabetes** after referral to hospital, but many people are not being referred early enough and access to eye tests had reduced. Wandsworth Healthwatch noted increased waiting times for services due.

Document: Healthwatch Kingston (2022) *Pulse Check Report – Services for people with diabetes*

Other tags: Kingston Hospital

Wandsworth Healthwatch noted increased waiting times for services due to the pandemic.

Document: Healthwatch Wandsworth (2021) *Experiences of managing health and care during the coronavirus pandemic 2021*

Other tags: St George's

Annex 4

2021 National Inpatient Survey analysis

The Adult Inpatient Survey 2021 examines the experience of adults that have been an inpatient at an NHS hospital.

Data relevant to each of the acute care trusts in South West London was downloaded from the [Care Quality Commission website](#). An analysis was undertaken to explore the indicators in which each trust performed very well (which ACV defined as scoring 8.0 or higher on 10.0 scale) and very poorly. The full results of this analysis can be found in the [accompanying spreadsheet](#). The results also show for which indicators there was SWL-wide very high and very low performance.

The results of this analysis have been used to supplement the findings from the qualitative analysis described in Annex 1.

Annex 5

References

1. Acute care (author and date unknown – provided by Nayan Tailor for analysis (provides summary information from patient engagement reports).
2. Care Quality Commission. *Adult inpatient survey 2021 benchmark reports*. ([Link](#))
3. Croydon Health Services NHS Trust (2023). Personal communication.
4. Croydon Health Services NHS Trust (2022). *Quality Account 2021/22*. ([Link](#))
5. Epsom and St Helier University Hospitals NS Trust; Sutton Health & Care; Surrey Downs Health & Care (2021) *Epsom and St Helier Patient Experience Annual Report 2020-2021*. ([Link](#))
6. Healthwatch Kingston (2022) *Pulse Check Report – Services for people with diabetes* ([Link](#))
7. Healthwatch Wandsworth (2022) *Carer experience of hospital discharge* ([Link](#))
8. Healthwatch Wandsworth (2021) *Experiences of digital and telephone appointments* ([Link](#))
9. Healthwatch Wandsworth (2022) *Experiences of Health and Social Care Services for People with Sight Loss* ([Link](#))
10. Healthwatch Wandsworth (2022) *Experiences of managing health and care during the coronavirus pandemic 2021* ([Link](#))
11. Author unknown. *ICB feedback for Planned Care: April 2022 to March 2023; FFT (Friends and Family Test) general themes*. (provided by Nayan Tailor for analysis). (2022)
12. Kingston Hospital NHS Foundation Trust (2022). *Quality Account 2021-22*. ([Link](#))
13. NHS SWL (2022) *Improving support for people following hospital discharge and bedded rehab: NHS South West London engagement summary*.

14. St George's University Hospitals NHS Foundation Trust (2022). *Annual Reports and Accounts 2021/22*. ([Link](#))

15. St George's University Hospitals NHS Foundation Trust (2022). *Quality report (account) 2021/22*. ([Link](#))

16. South West London ICS (2022) *Report on the Sutton Frailty Engagement Event*