Patients and students using patient feedback data
What does insight mean?

• Using qualitative and quantitative data to inform what we do
• Using whatever data sources we have - not just surveys, but a whole range of market and social research techniques and the patient voice
• Answering the question: So What?
Types of feedback

• Less descriptive
  – Feedback tools: (kiosks, SMS, apps) Examples include: Hospedia Synapta Feedback apps, Social media listening
  – Public Meetings: NHS Trusts CCGs

• More descriptive
  – In depth interviews
  – Focus groups & patient forums: NHS Trusts, CCGs, Healthwatch, Patient organisations
  – Online reviews & ratings: NHS Choices, Patient Opinion, IWantGreatCare
  – Patient stories: HealthTalkOnline, Patient Voices
Patient feedback data and data sources types

**Nature of the data:**
- Quantitative (e.g. GPPS)
- Qualitative, narrative (FFT, reviews, complaints)

**Level of data collection and analysis**
- National (e.g. GPPS)
- Regional
- Local (Surveys, FFT)

**Contain of data source**
Specific one data type (GPPS)
Integrated (NHS Choices, GP profiles)

**Format of the information is presented**
- Tables (GPPS tool)
- Dashboards
- Portal/sites (NHS Choices, GP profiles, GPPS site)

**Use**
- Individual (e.g. Choice)
- Collective (Improving services)
Available sources of patient feedback data

Specific patient feedback
• GPPS site

Integrated data/information
• NHS Choices website
• GP profiles
NHS Choices website

- Targets general public “helping you to make the best choices about your health and lifestyle, but also about making the most of NHS and social care services in England.”
- Produced by NHS England. Over 48 million visitors per month
- Comprehensive health information service: health articles, tools, service directories letting find, choose and compare health, support and social care services in England.
- Provision and collection GP practices patient feedback:
  - GPPS scores
  - Narrative: patients review and answers from practices
  - Practices rating
  - FFT in the future?
- Allows comparison between practices in the area by indicators which include key GPPS indicators
- Provide a summary of GPPS indicators allowing benchmarking
- Presents (and allows input of) reviews and star ratings from patients and responses from practices
GP practice profiles

• Targets: GPs, CCGs and local authorities “to ensure that they are providing and commissioning effective and appropriate healthcare services for their local population”.

• Produced by Public Health England (Link)

• Using a variety of graphical displays such as spine charts and population pyramids, the tool presents a range of practice-level indicators drawn from the latest available data, including:
  • Local demography
  • Quality and Outcomes Framework domains
  • Cancer Services
  • Child health
  • Patient experience (GPPS indicators) (Link)

• Allows comparison between practices and CCGs as well as benchmarking
GPPS site

• Targets general public presenting GPPS data
• GPPS is an independent survey run by Ipsos MORI on behalf of NHS England. The survey is sent out to over a million people across the UK.
• Presents results according:
  – What the practice does best and what have to improve
  – Questions scores and how patients answer questions (total patients and by groups)
  – Compares answers of practices with CCG and national average
  – Allows comparison with other practices
GPPS tool

• Based on GPPS data integrating data about:
  – Demography: age bands, ethnicity, diversity and rurality (in process)
  – Complaints

• Allows comparison and benchmarking, identifying key indicators improvements
Challenges of provision and use of patient feedback information

• Different data/information needs:
  – different health needs and preferences/expectation
  – different data uses (individual choice, service improvement, engagement)

• Accessibility to data where data presentation is important

• Data interpretation capacity

• How to integrate/ triangulate national collected with local data (surveys and FFT)

• How to integrate/ triangulate quantitative and qualitative patient feedback data

• Building an insight imply having a space to reflect about the data

• How to feel gaps information needs using effectively information already available avoiding duplication
Storytelling is the individual account of an event to create a memorable picture in the mind of the listener.
Why storytelling is valuable to practice

Stories are used to educate, train, entertain and communicate messages. There is a lot written on the use of storytelling in healthcare (including mental health) and healthcare education contexts, to bring about positive change for patients, and promote best practice for professionals.
Benefits of storytelling

• Places the person at the centre
• **Adds richer dimensions to understanding** ie needs of family and individual
• **Engenders empathy** ie can help to understanding cultural diversity.
• **Encourages reflection:** creates space for professionals to reflect on their own moral compass, and their personal values and practice in relation to other groups
• **Helps give voice to marginalised or excluded groups,** and provides opportunities to challenge or champion commonly held assumptions and beliefs
• **Stories are how we remember,** we tend to forget lists and bullet points

**ALSO:**

• **Storytelling is valuable to the storyteller**
Engagement with PPGs

The Patients Association, in collaboration with NHS England, organised a small PPG Data workshop for 25 people with the aim to identify how patient groups could make better use of patient feedback data. The workshop took place on April 12th, 2016.
Recommendation 1
• Work towards a small set of information for use by PPGs to provide evidence of patient experience

Recommendation 2
• Develop accessible guidance for professionals and patients about availability and use of data

Recommendation 3
• Train PPG members on what data and information is currently available to collect and analyse patient feedback i.e. SurveyMonkey, so they may be self-sustaining in terms of data analysis, and not reliant on a third party.

Recommendation 4
• Promote the collection and use of data by PPGs which is patient led, and specific to each practice. For example, surveys created by the PPG and distributed by the Practice.

Recommendation 5
• Transparency between the PPG and practice, in terms of data availability, so PPGs can make better use of relevant information.
Means nothing if nothing is done